Recipient Committee Campaign Statement (Government Code Sections 84200-
(Government Code Sections 04200-

			CALIFORNIA 2001/02 FORM	
Statement covers period from 07/01/2017 through 12/31/2017	Date of election if applicable: (Month, Day, Year)		Page	e 1 of 142 For Official Use Only
Ballot Measure Committee Primary Formed Controlled Sponsored (Also Complete Part 6.) Primary Formed Candidate/ Officeholder Committee (Also Complete Part 7.)	☐ Pre-election Statem ☐ Semi-annual Statem ☐ Termination Statem	ent nent ent	Specia Supple	erly Statement al Odd-Year Report emental Preelection nent - Attach Form 495
	Treasurer(s) NAME OF TREASURER Lillian Taiz			
	MAILING ADDRESS			
(916)441-4848	CITY Sacramento NAME OF ASSISTANT TREASURE Parvinder Kang	STATE CA ER, IF ANY	ZIP CODE 95814	AREA CODE/PHONE (916) 441-4848
	MAILING ADDRESS			
	CITY Sacramento OPTIONAL: FAX/E-MAIL ADDRES:	STATE CA S	ZIP CODE 95814	AREA CODE/PHONE (916) 441-4848
	through 12/31/2017 through 12/31/2017 mittees - Complete Parts 1,2,3, and 4. Ballot Measure Committee Primary Formed Controlled Sponsored (Also Complete Part 6.) Primary Formed Candidate/ Officeholder Committee (Also Complete Part 7.) I.D.NUMBER 1233722 TEE red by the California Faculty Association CODE AREA CODE/PHONE (916)441-4848 D. BOX	through 12/31/2017 mittees - Complete Parts 1,2,3, and 4. Ballot Measure Committee Primary Formed Soponsored (Also Complete Part 6.) Primary Formed Candidate/ Officeholder Committee (Also Complete Part 7.) I.D.NUMBER 1233722 Treasurer(s) NAME OF TREASURER Lillian Taiz MAILING ADDRESS CODE AREA CODE/PHONE (916)441-4848 D. BOX MAILING ADDRESS CITY Sacramento NAME OF ASSISTANT TREASURE Parvinder Kang MAILING ADDRESS CITY Sacramento NAME OF ASSISTANT TREASURE Parvinder Kang MAILING ADDRESS CITY Sacramento NAME OF ASSISTANT TREASURE Parvinder Kang MAILING ADDRESS	through 12/31/2017 mittees - Complete Parts 1,2,3, and 4. □ Ballot Measure Committee ○ Primary Formed ○ Controlled ○ Sponsored (Also Complete Part 6.) □ Primary Formed Candidate/Officeholder Committee (Also Complete Part 7.) □ I.D.NUMBER 1233722 TEE red by the California Faculty Association Treasurer(s) NAME OF TREASURER Lillian Taiz MAILING ADDRESS CODE AREA CODE/PHONE (916)441-4848 D. BOX CODE AREA CODE/PHONE O. BOX MAILING ADDRESS CITY Sacramento NAME OF ASSISTANT TREASURER, IF ANY Parvinder Kang MAILING ADDRESS CITY Sacramento CA MAILING ADDRESS	through 12/31/2017 through 12/31/2017 Imittees - Complete Parts 1,2,3, and 4. Ballot Measure Committee Primary Formed Semi-annual Statement Semi-annual Statement Supplet Statem Primary Formed Candidate/Officeholder Committee (Also Complete Part 6.) Primary Formed Candidate/Officeholder Committee (Also Complete Part 7.) I.D.NUMBER 1233722 Treasurer(s) NAME OF TREASURER Lillian Taiz MAILING ADDRESS Treasurer (s) NAME OF ASSISTANT TREASURER, IF ANY Parvinder Kang MAILING ADDRESS CODE AREA CODE/PHONE O. BOX CODE AREA CODE/PHONE CITY Sacramento CODE AREA CODE/PHONE CITY Sacramento CODE AREA CODE/PHONE CITY Sacramento CODE STATE ZIP CODE STATE ZIP CODE STATE ZIP CODE STATE ZIP CODE CA 95814

is true and complete. I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Executed on_	01/19/2018	By Parvinder Kang
	DATE	SIGNATURE OF TREASURER OR ASSISTANT TREASURER
Executed on_	01/19/2018	By Parvinder Kang
	DATE	SIGNATURE OF CONTROLLING OFFICEHOLDER, CANDIDATE, STATE MEASURE PROPONENT OR RESPONSIBLE OFFICER OF SPONSOR
Executed on_		
	DATE	SIGNATURE OF CONTROLLING OFFICEHOLDER, CANDIDATE, STATE MEASURE PROPONENT
Executed on_		
	DATE	SIGNATURE OF CONTROLLING OFFICEHOLDER, CANDIDATE, STATE MEASURE PROPONENT

FPPC Form 460 (June/01) FPPC Toll-Free Helpline: 866/ASK-FPPC State of California

COVER PAGE - PART 2 CALIFORNIA 460

Page	2	of _	142
Page		o	

NAME OF OFFICEHOLDER OR CANDIDATE			-	NAME OF BALLOT MEASURE				
OFFICE SOUGHT OR HELD (INCLUDE LOCATION	I AND DISTRICT NUMBE	R IF APPLICABLE)	_	BALLOT NO. OR LETTER	JURISDICTIO	DN		SUPPORT OPPOSE
RESIDENTIAL/BUSINESS ADDRESS (NO. AND ST	TREET) CITY	STATE ZIP	-	Identify the controlling office	ceholder, cand	idate, or state	measure prop	onent, if any.
			_	NAME OF OFFICEHOLDER, CA	NDIDATE, OR PF	ROPONENT		
Related Committees Not Included not included in this statement that are controlled contributions or to make expenditures on behalf	by you or are primarily			OFFICE SOUGHT OR HELD			DISTRICT NO. I	F ANY
COMMITTEE NAME	I.D.NUM	BER	7.	Primarily Formed (E List names	of officeholder(s) or candidate(s) Ffo
NAME OF TREASURER	CONTR	DLLED COMMITTEE?	-	NAME OF OFFICEHOLDER OR	CANDIDATE	OFFICE SOUG	GHT OR HELD	SUPPORT OPPOSE
COMMITTEE ADDRESS STREET ADDRESS (NO I	P.O.BOX)		-	NAME OF OFFICEHOLDER OR	CANDIDATE	OFFICE SOUG	GHT OR HELD	SUPPORT
CITY ST	ATE ZIP CODE	AREA CODE/PHONE	-					OPPOSE
COMMITTEE NAME	I.D.NUN	BER	•	NAME OF OFFICEHOLDER OR	CANDIDATE	OFFICE SOUG	GHT OR HELD	SUPPORT OPPOSE
NAME OF TREASURER	CONTR	OLLED COMMITTEE?	-	NAME OF OFFICEHOLDER OR	CANDIDATE	OFFICE SOUG	GHT OR HELD	SUPPORT OPPOSE
COMMITTEE ADDRESS STREET ADDRESS (NO I	P.O.BOX)		_					
	ATE ZIP CODE		_	Attac	h continuation	sheets if nece	essarv	

Recipient Committee Campaign Statement Cover Page - Part 2

Campaign Disclosure Statement Summary Page

Faculty for Our University's Future, Local Committee, sponsored by the California Faculty Association

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Type or print in ink. Amounts may be rounded to whole dollars.

Statement covers period CALIFORNIA FORM from <u>07/01/2017</u> through $\frac{12/31/2017}{}$ of 142**Page** <u>3</u> I.D. NUMBER 1233722

SUMMARY PAGE

raculty for Our Oniversity's Puttile, Local Committee, sponsored by the Camorina Pacinty Assoc	Clation		1233722
Contributions Received	Column A TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)	Column B CALENDAR YEAR TOTAL TO DATE	Calendar Year Summary for Candidates Running in Both the State Primary and
Monetary Contributions Schedule A, Line 3	\$17,505.00	\$35,620.00	General Elections
Loans Received Schedule B, Line 7	\$0.00	\$0.00	1/1 through 6/30 7/1 to Date
3. SUBTOTAL CASH CONTRIBUTIONS Add Lines 1 + 2	\$17,505.00	\$35,620.00	20. Contribution Received \$.00 \$.00
4. Nonmonetary Contributions Schedule C, Line 3	\$2,418.32	\$4,825.04	
5. TOTAL CONTRIBUTIONS RECEIVED Add Lines 3 + 4	\$19,923.32	\$40,445.04	21. Expenditures Made \$.00 \$.00
Expenditures Made			Expenditure Limit Summary for State
6. Payments Made Schedule E, Line 4	\$7,055.00	\$23,480.00	Candidates
7. Loans Made Schedule H, Line 7	\$0.00	\$0.00	22. Cumulative Expenditures Made*
8. SUBTOTAL CASH PAYMENTS Add Lines 6 + 7	\$7,055.00	\$23,480.00	(If Subject to Voluntary Expenditure Limit)
9. Accrued Expenses (Unpaid Bills) Schedule F, Line 3	\$0.00	\$0.00	Date of Election Total to Date
10. Nonmonetary Adjustment Schedule C, Line 3	\$2,418.32	\$4,825.04	(mm/dd/yy)
11. TOTAL EXPENDITURES MADE Add Lines 8 + 9 + 10	\$9,473.32	\$28,305.04	
Current Cash Statement			1
12. Beginning Cash Balance Previous Summary Page, Line 16	\$17,356.08	To calculate Column B, add amounts in Column A to the	
13. Cash Receipts Column A, Line 3 above	\$17,505.00	corresponding amounts	
14. Miscellaneous Increases to Cash Schedule I, Line 4	\$1.23	from Column B of your last report. Some amounts in	
15. Cash Payments Column A, Line 8 above	\$7,055.00	Column A may be negative	
16. ENDING CASH BALANCE Add Lines 12 + 13 + 14, then subtract Line 15	\$27,807.31	figures that should be subtracted from previous	
If this is a termination statement, Line 16 must be zero.		period amounts. If this is the first report being filed	
17. LOAN GUARANTEES RECEIVED Schedule B, Part 2	\$0.00	for this calendar year, only carry over the amounts	
Cash Equivalents and Outstanding Debts		from Lines 2, 7, and 9 (if any).	*Since January 1, 2001. Amounts in this section may be different from amounts reported in Column B.
18. Cash Equivalents See instructions on reverse	\$0.00	-	amoroni nom amounts reported in Column b.
19. Outstanding Debts Add Line 2 + Line 9 in Column B above	\$0.00	-	FPPC Form 460 (June/01 FPPC Toll-Free Helpline: 866/ASK-FPPC

Schedule A

Type or print in ink.

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Monetary Contributions Received			nts may be rounded whole dollars.	Statement covers period from 07/01/2017		CALIFORNIA 460		
SEE INSTRUCTION	ONS ON REVERSE			through12/31/201	7	Page <u>4</u>	of 142	
NAME OF FILER Faculty for Our U	niversity's Future, Local Committee, sponsored by the California Fa	aculty Association		1		I.D. Nur 1233722		
DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO CALENDAR YE (JAN. 1 - DEC.	AR	PER ELECTION TO DATE (IF REQUIRED)	
7/31/2017	Doreen M. Anderson-Facile Bakersfield, CA 93311	IND COM OTH PTY SCC	California State University, Bakersfield Faculty Member	\$15.00	\$180.00			
8/28/2017	Doreen M. Anderson-Facile Bakersfield, CA 93311	IND COM OTH PTY SCC	California State University, Bakersfield Faculty Member	\$15.00	\$180.00			
9/14/2017	Doreen M. Anderson-Facile Bakersfield, CA 93311	IND COM OTH PTY SCC	California State University, Bakersfield Faculty Member	\$15.00	\$180.00			
10/9/2017	Doreen M. Anderson-Facile Bakersfield, CA 93311	IND COM OTH PTY SCC	California State University, Bakersfield Faculty Member	\$15.00	\$180.00			
12/4/2017	Doreen M. Anderson-Facile Bakersfield, CA 93311	IND COM OTH PTY SCC	California State University, Bakersfield Faculty Member	\$15.00	\$180.00			
			SUBTOTA	L				
Schedule /	A Summary				*0-) - d	

1. Amount received this period - contributions of \$100 or more. \$17,345.00 (Include all Schedule A subtotals.) \$160.00 2. Amount received this period - unitemized contributions of less than \$100 3. Total monetary contributions received this period. \$17,505.00

*Contributor Codes

IND - Individual

COM - Recipient Committee (other than PTY or SCC)

OTH - Other

PTY - Political Party

SCC - Small Contributor Committee

Type or print in ink. Amounts may be rounded

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Monetary	Ionetary Contributions Received to whole dollars.		•	from 07/01/201	•	CALI F	FORNIA 460
-	ONS ON REVERSE			through12/31/201	7	Page _	
NAME OF FILER Faculty for Our U	niversity's Future, Local Committee, sponsored by the California Fac	culty Association				I.D. Nu 123372	
DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO CALENDAR Y (JAN. 1 - DEC.	EAR	PER ELECTION TO DATE (IF REQUIRED)
12/18/2017	Doreen M. Anderson-Facile Bakersfield, CA 93311	IND COM OTH PTY SCC	California State University, Bakersfield Faculty Member	\$15.00	\$180.00		
7/31/2017	F. Javier Trigos Arrieta Bakersfield, CA 93311	IND COM OTH PTY SCC	California State University, Bakersfield Faculty Member	\$25.00	\$300.00		
8/28/2017	F. Javier Trigos Arrieta Bakersfield, CA 93311	IND COM OTH PTY SCC	California State University, Bakersfield Faculty Member	\$25.00	\$300.00		
9/14/2017	F. Javier Trigos Arrieta Bakersfield, CA 93311	IND COM OTH PTY	California State University, Bakersfield Faculty Member	\$25.00	\$300.00		

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\$25.00

\$300.00

California State University, Bakersfield Faculty Member

IND

COM OTH PTY \square scc

*Contributor Codes

IND - Individual

10/9/2017

COM - Recipient Committee (other than PTY or SCC)

OTH - Other

PTY - Political Party

SCC - Small Contributor Committee

F. Javier Trigos Arrieta Bakersfield, CA 93311

Type or print in ink.
Amounts may be rounded

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Statement covers period

Wonetary	Contributions Neceived	to	whole dollars.	from07/01/2017		FORM 46U	
SEE INSTRUCTIO	ONS ON REVERSE			through	7	Page	_6of_142
NAME OF FILER Faculty for Our U	niversity's Future, Local Committee, sponsored by the California Fa	aculty Association				I.D. N 12337	umber 22
DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO CALENDAR Y (JAN. 1 - DEC.	EAR	PER ELECTION TO DATE (IF REQUIRED)
12/4/2017	F. Javier Trigos Arrieta Bakersfield, CA 93311	IND COM OTH PTY SCC	California State University, Bakersfield Faculty Member	\$25.00	\$300.00		
12/18/2017	F. Javier Trigos Arrieta Bakersfield, CA 93311	IND COM OTH PTY SCC	California State University, Bakersfield Faculty Member	\$25.00	\$300.00		
7/31/2017	Michelle R. Arsneault Fullerton, CA 92831	IND COM OTH PTY SCC	California State University, Fullerton Faculty Member	\$25.00	\$300.00		
8/28/2017	Michelle R. Arsneault Fullerton, CA 92831	IND COM OTH PTY	California State University, Fullerton Faculty Member	\$25.00	\$300.00		

IND

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\$25.00

\$300.00

California State University,

Fullerton
Faculty Member

*Contributor Codes

IND - Individual

9/14/2017

COM - Recipient Committee (other than PTY or SCC)

Michelle R. Arsneault

Fullerton, CA 92831

OTH - Other

PTY - Political Party

SCC - Small Contributor Committee

Type or print in ink. Amounts may be rounded

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Monetary	Contributions Received		o whole dollars.	Statement covers period from 07/01/2017		CALIFORNIA 46	
SEE INSTRUCTIO	NS ON REVERSE			through 12/31/201	7	Page	7 of 142
NAME OF FILER Faculty for Our U	niversity's Future, Local Committee, sponsored by the California Fac	culty Association				I.D. N 123372	
DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO CALENDAR Y (JAN. 1 - DEC	EAR	PER ELECTION TO DATE (IF REQUIRED)
10/9/2017	Michelle R. Arsneault Fullerton, CA 92831	IND COM OTH PTY SCC	California State University, Fullerton Faculty Member	\$25.00	\$300.00		
12/4/2017	Michelle R. Arsneault Fullerton, CA 92831	IND COM OTH PTY SCC	California State University, Fullerton Faculty Member	\$25.00	\$300.00		
12/18/2017	Michelle R. Arsneault Fullerton, CA 92831	IND COM OTH PTY SCC	California State University, Fullerton Faculty Member	\$25.00	\$300.00		
7/31/2017	Nicholas L. Baham Hayward, CA 94543	IND COM OTH PTY SCC	California State Univesity, East Bay Faculty Member	\$25.00	\$300.00		

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\$25.00

\$300.00

California State Univesity, East

Bay Faculty Member

*Contributor Codes

IND - Individual

8/28/2017

COM - Recipient Committee (other than PTY or SCC)

OTH - Other

PTY - Political Party

SCC - Small Contributor Committee

Nicholas L. Baham Hayward, CA 94543

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Amounts may be rounded

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Monetary (etary Contributions Received to whole dolla		whole dollars.	from 07/01/2017	•	CALIFORNIA 46		
SEE INSTRUCTIONS ON REVERSE through 12/31/2017					7	Page _8 of142		
NAME OF FILER Faculty for Our Uni	AME OF FILER I.D. Number aculty for Our University's Future, Local Committee, sponsored by the California Faculty Association 1233722							
DATE	FULL NAME, MAILING ADDRESS	CONTRIBUTOR	IF AN INDIVIDUAL, ENTER	AMOUNT	CUMULATIVE TO	DATE	PER ELECTION	_

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
9/14/2017	Nicholas L. Baham Hayward, CA 94543	IND COM OTH PTY SCC	California State Univesity, East Bay Faculty Member	\$25.00	\$300.00	
10/9/2017	Nicholas L. Baham Hayward, CA 94543	IND COM OTH PTY SCC	California State Univesity, East Bay Faculty Member	\$25.00	\$300.00	
12/4/2017	Nicholas L. Baham Hayward, CA 94543	IND COM OTH PTY SCC	California State Univesity, East Bay Faculty Member	\$25.00	\$300.00	
12/18/2017	Nicholas L. Baham Hayward, CA 94543	IND COM OTH PTY SCC	California State Univesity, East Bay Faculty Member	\$25.00	\$300.00	
7/31/2017	Michele L. Barr Fullerton, CA 92831	IND COM OTH PTY SCC	California State University, Fullerton Faculty Member	\$20.00	\$240.00	

*Contributor Codes

IND - Individual

COM - Recipient Committee (other than PTY or SCC)

OTH - Other

PTY - Political Party

Michele L. Barr

Michele L. Barr

Michele L. Barr

Fullerton, CA 92831

Fullerton, CA 92831

Fullerton, CA 92831

Type or print in ink.
Amounts may be rounded

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Monetary (Contributions Received		whole dollars.	Statement covers period from 07/01/2017		CALIFORNIA 460	
SEE INSTRUCTION	NS ON REVERSE			through12/31/2017	7	Page	9 of 142
NAME OF FILER Faculty for Our University's Future, Local Committee, sponsored by the California Faculty Association						I.D. Number 1233722	
DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO CALENDAR YE (JAN. 1 - DEC.	EAR	PER ELECTION TO DATE (IF REQUIRED)
8/28/2017	Michele L. Barr Fullerton, CA 92831	IND COM OTH PTY SCC	California State University, Fullerton Faculty Member	\$20.00	\$240.00		
9/14/2017	Michele L. Barr Fullerton, CA 92831	IND COM OTH PTY	California State University, Fullerton Faculty Member	\$20.00	\$240.00		

Fullerton Faculty Member

Fullerton

Faculty Member

Fullerton
Faculty Member

California State University,

California State University,

California State University,

\$20.00

\$20.00

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☐ PTY ☐ SCC

IND

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IND

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SUBTOTAL

\$240.00

\$240.00

\$240.00

*Contributor Codes

IND - Individual

10/9/2017

12/4/2017

12/18/2017

COM - Recipient Committee (other than PTY or SCC)

OTH - Other

PTY - Political Party

Type or print in ink. Amounts may be rounded

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Monetary Contributions Received			nts may be rounded whole dollars.	Statement covers period from 07/01/2017		CALIFORNIA 460	
	INS ON REVERSE			through12/31/201	7	Page	
NAME OF FILER Faculty for Our U	niversity's Future, Local Committee, sponsored by the California Fa	culty Association				I.D. N 12337	
DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO CALENDAR Y (JAN. 1 - DEC	EAR	PER ELECTION TO DATE (IF REQUIRED)
7/31/2017	Cecile S. Bendavid Northridge, CA 91330	IND COM OTH PTY SCC	California State University, Northridge Faculty Member	\$25.00	\$300.00		
8/28/2017	Cecile S. Bendavid Northridge, CA 91330	IND COM OTH PTY SCC	California State University, Northridge Faculty Member	\$25.00	\$300.00		
9/14/2017	Cecile S. Bendavid Northridge, CA 91330	IND COM OTH PTY SCC	California State University, Northridge Faculty Member	\$25.00	\$300.00		
10/9/2017	Cecile S. Bendavid Northridge, CA 91330	IND COM OTH PTY SCC	California State University, Northridge Faculty Member	\$25.00	\$300.00		

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\$25.00

\$300.00

California State University, Northridge Faculty Member

*Contributor Codes

IND - Individual

12/4/2017

COM - Recipient Committee (other than PTY or SCC)

OTH - Other

PTY - Political Party

SCC - Small Contributor Committee

Cecile S. Bendavid Northridge, CA 91330

Type or print in ink.
Amounts may be rounded

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Monetary Contributions Received			o whole dollars.	Statement covers period from 07/01/2017		CALIFORNIA 460	
SEE INSTRUCTION	DNS ON REVERSE			through	7	Page	11 of 142
NAME OF FILER Faculty for Our U	'niversity's Future, Local Committee, sponsored by the California Fac	culty Association				I.D. N 12337	umber 22
DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO CALENDAR YI (JAN. 1 - DEC.	EAR	PER ELECTION TO DATE (IF REQUIRED)
12/18/2017	Cecile S. Bendavid Northridge, CA 91330	IND COM OTH PTY SCC	California State University, Northridge Faculty Member	\$25.00	\$300.00		
7/31/2017	Margie I. Berta-Avila Sacramento, CA 95819	IND COM OTH PTY	Sacramento State University Faculty Member	\$15.00	\$180.00		
8/28/2017	Margie I. Berta-Avila Sacramento, CA 95819	IND COM OTH PTY	Sacramento State University Faculty Member	\$15.00	\$180.00		
9/14/2017	Margie I. Berta-Avila Sacramento, CA 95819	IND COM OTH PTY SCC	Sacramento State University Faculty Member	\$15.00	\$180.00		
10/9/2017	Margie I. Berta-Avila Sacramento, CA 95819	IND COM	Sacramento State University Faculty Member	\$15.00	\$180.00		

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PTY
SCC

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*Contributor Codes

IND - Individual

COM - Recipient Committee (other than PTY or SCC)

OTH - Other

PTY - Political Party

SCC - Small Contributor Committee

Schedule A (Continuation Sheet)

Mayra G. Besosa

Mayra G. Besosa

Mayra G. Besosa

San Marcos, CA 92096

San Marcos, CA 92096

San Marcos, CA 92096

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Monetary Contributions Received			ts may be rounded whole dollars.	Statement covers period from 07/01/2017		CALIFORNIA 460	
SEE INSTRUCTION	IS ON REVERSE			through12/31/2017	7	Page	of_ 142
NAME OF FILER Faculty for Our University's Future, Local Committee, sponsored by the California Faculty Association						I.D. N 12337	
DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO CALENDAR YE (JAN. 1 - DEC.	AR	PER ELECTION TO DATE (IF REQUIRED)
12/4/2017	Margie I. Berta-Avila Sacramento, CA 95819	IND COM OTH PTY SCC	Sacramento State University Faculty Member	\$15.00	\$180.00		
12/18/2017	Margie I. Berta-Avila Sacramento, CA 95819	IND COM OTH PTY	Sacramento State University Faculty Member	\$15.00	\$180.00		

Marcos Faculty Member

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Faculty Member

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ОТН ☐ PTY ☐ SCC

SUBTOTAL

\$300.00

\$300.00

\$300.00

*Contributor Codes

IND - Individual

7/31/2017

8/28/2017

9/14/2017

COM - Recipient Committee (other than PTY or SCC)

OTH - Other

PTY - Political Party

SCC - Small Contributor Committee

Type or print in ink.
Amounts may be rounded

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SEE INSTRUCTION	DNS ON REVERSE			through12/31/201	7	Page	of	
NAME OF FILER Faculty for Our U	Iniversity's Future, Local Committee, sponsored by the California Fac	culty Association				I.D. N 12337	umber 22	
DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO CALENDAR YI (JAN. 1 - DEC.	EAR	PER ELECTION TO DATE (IF REQUIRED)	
10/9/2017	Mayra G. Besosa San Marcos, CA 92096	IND COM OTH PTY SCC	California State University, San Marcos Faculty Member	\$25.00	\$300.00			
12/4/2017	Mayra G. Besosa San Marcos, CA 92096	IND COM OTH PTY SCC	California State University, San Marcos Faculty Member	\$25.00	\$300.00			
12/18/2017	Mayra G. Besosa San Marcos, CA 92096	IND COM OTH PTY SCC	California State University, San Marcos Faculty Member	\$25.00	\$300.00			
7/31/2017	John C. Beynon Fresno, CA 93740	IND COM	California State University, Fresno	\$25.00	\$300.00			

Faculty Member

Fresno Faculty Member

California State University,

☐ OTH ☐ PTY ☐ SCC

IND

☐ COM ☐ OTH ☐ PTY ☐ SCC

\$25.00

\$300.00

Statement covers period

*Contributor Codes

IND - Individual

8/28/2017

COM - Recipient Committee (other than PTY or SCC)

OTH - Other

PTY - Political Party

SCC - Small Contributor Committee

John C. Beynon Fresno, CA 93740

John C. Beynon

John C. Beynon

Diane M. Blair

Fresno, CA 93740

Fresno, CA 93740

Fresno, CA 93740

Type or print in ink.
Amounts may be rounded

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Monetary (Contributions Received	to	whole dollars.	from 07/01/2017	•	CAL F	orm 460		
SEE INSTRUCTIONS ON REVERSE through 12/31/2017 Pag									
NAME OF FILER Faculty for Our University's Future, Local Committee, sponsored by the California Faculty Association						I.D. N 12337	umber 22		
DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO CALENDAR YE (JAN. 1 - DEC.	AR	PER ELECTION TO DATE (IF REQUIRED)		
9/14/2017	John C. Beynon Fresno, CA 93740	IND COM OTH PTY SCC	California State University, Fresno Faculty Member	\$25.00	\$300.00				
10/9/2017	John C. Beynon Fresno, CA 93740	IND COM OTH PTY	California State University, Fresno Faculty Member	\$25.00	\$300.00				

Fresno

Fresno Faculty Member

Faculty Member

Faculty Member

California State University,

California State University,

California State University,

\$25.00

\$25.00

\$15.00

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IND

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COM

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SUBTOTAL		
SUBTOTAL		
JUDIUIAL		

\$300.00

\$300.00

\$180.00

*Contributor Codes

IND - Individual

COM - Recipient Committee (other than PTY or SCC)

OTH - Other

12/4/2017

12/18/2017

7/31/2017

PTY - Political Party

Type or print in ink.
Amounts may be rounded

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Statement covers period

,			whole dollars.	from07/01/201	7	F	ORM 40U
SEE INSTRUCTIO	ONS ON REVERSE			through12/31/201	7	Page	
NAME OF FILER Faculty for Our U	niversity's Future, Local Committee, sponsored by the California Fact	ulty Association				I.D. N 12337	umber 22
DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO CALENDAR Y (JAN. 1 - DEC	EAR	PER ELECTION TO DATE (IF REQUIRED)
8/28/2017	Diane M. Blair Fresno, CA 93740	■ IND □ COM □ OTH □ PTY □ SCC	California State University, Fresno Faculty Member	\$15.00	\$180.00		
9/14/2017	Diane M. Blair Fresno, CA 93740	IND COM OTH PTY SCC	California State University, Fresno Faculty Member	\$15.00	\$180.00		
10/9/2017	Diane M. Blair Fresno, CA 93740	IND COM OTH PTY SCC	California State University, Fresno Faculty Member	\$15.00	\$180.00		
12/4/2017	Diane M. Blair Fresno, CA 93740	IND COM OTH PTY	California State University, Fresno Faculty Member	\$15.00	\$180.00		

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\$15.00

\$180.00

California State University,

Fresno Faculty Member

*Contributor Codes

IND - Individual

12/18/2017

COM - Recipient Committee (other than PTY or SCC)

OTH - Other

PTY - Political Party

SCC - Small Contributor Committee

Diane M. Blair

Fresno, CA 93740

Type or print in ink.
Amounts may be rounded

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Monetary	Contributions Received	1s Received to whole dollars.		Statement cov	•	CALII F(FORNIA 460
SEE INSTRUCTIO	ONS ON REVERSE			through12/31/202	17	Page _	16 of 142
NAME OF FILER Faculty for Our U	niversity's Future, Local Committee, sponsored by the California Fa	culty Association				I.D. Nu 123372	
DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO CALENDAR YE (JAN. 1 - DEC.	AR	PER ELECTION TO DATE (IF REQUIRED)
7/31/2017	Lois K. Boulgarides Sacramento, CA 95819	IND COM OTH PTY SCC	Sacramento State University Faculty Member	\$15.00	\$180.00		
8/28/2017	Lois K. Boulgarides Sacramento, CA 95819	IND COM OTH PTY	Sacramento State University Faculty Member	\$15.00	\$180.00		
9/14/2017	Lois K. Boulgarides Sacramento, CA 95819	IND COM OTH PTY SCC	Sacramento State University Faculty Member	\$15.00	\$180.00		
10/9/2017	Lois K. Boulgarides Sacramento, CA 95819	IND COM OTH PTY	Sacramento State University Faculty Member	\$15.00	\$180.00		

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\$15.00

\$180.00

Sacramento State University Faculty Member

*Contributor Codes

IND - Individual

12/4/2017

COM - Recipient Committee (other than PTY or SCC)

Lois K. Boulgarides Sacramento, CA 95819

OTH - Other

PTY - Political Party

SCC - Small Contributor Committee

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Amounts may be rounded

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Monetary	Contributions Received		nts may be rounded whole dollars.	Statement covers period from 07/01/2017		CALIFORNIA 460	
SEE INSTRUCTIO	ONS ON REVERSE			through	7	Page _	17 of 142
NAME OF FILER Faculty for Our U	niversity's Future, Local Committee, sponsored by the California Fa	culty Association				I.D. Nu 123372	
DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO CALENDAR YE (JAN. 1 - DEC.	AR	PER ELECTION TO DATE (IF REQUIRED)
12/18/2017	Lois K. Boulgarides Sacramento, CA 95819	IND COM OTH PTY SCC	Sacramento State University Faculty Member	\$15.00	\$180.00		
7/31/2017	David W. Bradfield Carson, CA 90747	IND COM OTH PTY SCC	California State University, Dominguez Hills Faculty Member	\$50.00	\$600.00		
8/28/2017	David W. Bradfield Carson, CA 90747	IND COM OTH PTY SCC	California State University, Dominguez Hills Faculty Member	\$50.00	\$600.00		
9/14/2017	David W. Bradfield Carson, CA 90747	IND COM OTH PTY SCC	California State University, Dominguez Hills Faculty Member	\$50.00	\$600.00		
10/9/2017	David W. Bradfield Carson, CA 90747	IND COM OTH PTY SCC	California State University, Dominguez Hills Faculty Member	\$50.00	\$600.00		

SUBTOTAL

*Contributor Codes

IND - Individual

COM - Recipient Committee (other than PTY or SCC)

OTH - Other

PTY - Political Party

SCC - Small Contributor Committee

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Amounts may be rounded to whole dollars.

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Statement covers period

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SEE INSTRUCTION	ONS ON REVERSE			through12/31/201	7	Page	of142
NAME OF FILER Faculty for Our U	niversity's Future, Local Committee, sponsored by the California Fa	culty Association				I.D. N 12337	lumber 22
DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO CALENDAR Y (JAN. 1 - DEC	EAR	PER ELECTION TO DATE (IF REQUIRED)
12/4/2017	David W. Bradfield Carson, CA 90747	IND COM OTH PTY SCC	California State University, Dominguez Hills Faculty Member	\$50.00	\$600.00		
12/18/2017	David W. Bradfield Carson, CA 90747	IND COM OTH PTY SCC	California State University, Dominguez Hills Faculty Member	\$50.00	\$600.00		
7/31/2017	Gregory C. Brown Fullerton, CA 92831	IND COM OTH PTY SCC	California State University, Fullerton Faculty Member	\$15.00	\$180.00		
8/28/2017	Gregory C. Brown Fullerton, CA 92831	IND COM OTH PTY	California State University, Fullerton Faculty Member	\$15.00	\$180.00		

IND

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\$15.00

\$180.00

California State University, Fullerton Faculty Member

*Contributor Codes

IND - Individual

9/14/2017

COM - Recipient Committee (other than PTY or SCC)

OTH - Other

PTY - Political Party

SCC - Small Contributor Committee

Gregory C. Brown Fullerton, CA 92831

Schedule A (Continuation Sheet)

Leslie A. Bryan San Bernardino, CA 92407

Leslie A. Bryan San Bernardino, CA 92407

Type or print in ink. Amounts may be rounded

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Monetary Contributions Received			to whole dollars.		Statement covers period from 07/01/2017		CALIFORNIA 460	
SEE INSTRUCTION	NS ON REVERSE			through 12/31/2017	7	Page .	of142	
NAME OF FILER Faculty for Our Un	niversity's Future, Local Committee, sponsored by the California Facult			I.D. Nu 123372				
DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO CALENDAR YE (JAN. 1 - DEC.	EAR	PER ELECTION TO DATE (IF REQUIRED)	
10/9/2017	Gregory C. Brown Fullerton, CA 92831	IND COM OTH PTY	California State University, Fullerton Faculty Member	\$15.00	\$180.00			
12/4/2017	Gregory C. Brown Fullerton, CA 92831	IND COM OTH PTY	California State University, Fullerton Faculty Member	\$15.00	\$180.00			
12/18/2017	Gregory C. Brown Fullerton, CA 92831	IND COM OTH	California State University, Fullerton Faculty Member	\$15.00	\$180.00			

California State University, San Bernardino

California State University, San

Faculty Member

Bernardino Faculty Member

\$20.00

\$20.00

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SUBTOTAL

\$240.00

\$240.00

*Contributor Codes

IND - Individual

7/31/2017

8/28/2017

COM - Recipient Committee (other than PTY or SCC)

OTH - Other

PTY - Political Party

SCC - Small Contributor Committee

Type or print in ink. Amounts may be rounded to whole dollars.

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Statement covers period

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SEE INSTRUCTIO	ONS ON REVERSE			through12/31/201	7	Page _	20 of 142
NAME OF FILER				1		I.D. Nu	ımber
Faculty for Our U	niversity's Future, Local Committee, sponsored by the California Fact	ulty Association				123372	2
DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO CALENDAR YI (JAN. 1 - DEC.	EAR	PER ELECTION TO DATE (IF REQUIRED)
9/14/2017	Leslie A. Bryan San Bernardino, CA 92407	■ IND □ COM □ OTH □ PTY □ SCC	California State University, San Bernardino Faculty Member	\$20.00	\$240.00		
10/9/2017	Leslie A. Bryan San Bernardino, CA 92407	IND COM OTH PTY SCC	California State University, San Bernardino Faculty Member	\$20.00	\$240.00		
12/4/2017	Leslie A. Bryan San Bernardino, CA 92407	IND COM OTH PTY SCC	California State University, San Bernardino Faculty Member	\$20.00	\$240.00		
12/18/2017	Leslie A. Bryan San Bernardino, CA 92407	IND COM OTH PTY SCC	California State University, San Bernardino Faculty Member	\$20.00	\$240.00		
10/9/2017	Lillian V. Castaneda Camarillo, CA 93012	IND COM	California State University, Channel Islands	\$25.00	\$150.00		

Faculty Member

COM

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SUBTOTAL

*Contributor Codes

IND - Individual

COM - Recipient Committee (other than PTY or SCC)

OTH - Other

PTY - Political Party

SCC - Small Contributor Committee

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Amounts may be rounded to whole dollars.

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Statement covers period

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SEE INSTRUCTIO	ONS ON REVERSE			through	7	Page	of142
NAME OF FILER Faculty for Our U	niversity's Future, Local Committee, sponsored by the California Fac	culty Association				I.D. N 12337	umber 22
DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO CALENDAR Y (JAN. 1 - DEC	EAR	PER ELECTION TO DATE (IF REQUIRED)
12/4/2017	Lillian V. Castaneda Camarillo, CA 93012	IND COM OTH PTY SCC	California State University, Channel Islands Faculty Member	\$25.00	\$150.00		
12/18/2017	Lillian V. Castaneda Camarillo, CA 93012	IND COM OTH PTY SCC	California State University, Channel Islands Faculty Member	\$25.00	\$150.00		
7/31/2017	Kirti S. Celly Carson, CA 90747	IND COM OTH PTY SCC	California State University, Dominguez Hills Faculty Member	\$20.00	\$240.00		
8/28/2017	Kirti S. Celly Carson, CA 90747	IND COM OTH PTY	California State University, Dominguez Hills Faculty Member	\$20.00	\$240.00		

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\$20.00

\$240.00

California State University, Dominguez Hills Faculty Member

*Contributor Codes

IND - Individual

9/14/2017

COM - Recipient Committee (other than PTY or SCC)

Kirti S. Celly Carson, CA 90747

OTH - Other

PTY - Political Party

SCC - Small Contributor Committee

Type or print in ink. Amounts may be rounded

SCHEDULE A (CONT.)

Monetary Contributions Received			to whole dollars.		Statement covers period from 07/01/2017		CALIFORNIA 460		
SEE INSTRUCTIO	NS ON REVERSE			through12/31/201	7	Page			
NAME OF FILER Faculty for Our U	niversity's Future, Local Committee, sponsored by the California Fac	culty Association				I.D. No 123372			
DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO CALENDAR Y (JAN. 1 - DEC	EAR	PER ELECTION TO DATE (IF REQUIRED)		
10/9/2017	Kirti S. Celly Carson, CA 90747	IND COM OTH PTY SCC	California State University, Dominguez Hills Faculty Member	\$20.00	\$240.00				
12/4/2017	Kirti S. Celly Carson, CA 90747	IND COM OTH PTY SCC	California State University, Dominguez Hills Faculty Member	\$20.00	\$240.00				
12/18/2017	Kirti S. Celly Carson, CA 90747	IND COM OTH PTY SCC	California State University, Dominguez Hills Faculty Member	\$20.00	\$240.00				
7/31/2017	Vincent Cevasco Sacramento, CA 95814	IND COM OTH PTY SCC	California Faculty Association Staff Member	\$15.00	\$180.00				

IND

COM OTH PTY \square scc

SUBTOTAL	
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\$15.00

\$180.00

California Faculty Association Staff Member

*Contributor Codes

IND - Individual

8/28/2017

COM - Recipient Committee (other than PTY or SCC)

Vincent Cevasco

Sacramento, CA 95814

OTH - Other

PTY - Political Party

Type or print in ink. Amounts may be rounded

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Monetary	Contributions Received to whole dollars.		Statement cov	•	CALI F	FORNIA 460	
SEE INSTRUCTIO	NS ON REVERSE			through 12/31/201	7	Page	23 of 142
NAME OF FILER Faculty for Our U	niversity's Future, Local Committee, sponsored by the California Fac	culty Association				I.D. No 123372	
DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO CALENDAR Y (JAN. 1 - DEC	EAR	PER ELECTION TO DATE (IF REQUIRED)
9/14/2017	Vincent Cevasco Sacramento, CA 95814	IND COM OTH PTY SCC	California Faculty Association Staff Member	\$15.00	\$180.00		
10/9/2017	Vincent Cevasco Sacramento, CA 95814	IND COM OTH PTY SCC	California Faculty Association Staff Member	\$15.00	\$180.00		
12/4/2017	Vincent Cevasco Sacramento, CA 95814	IND COM OTH PTY SCC	California Faculty Association Staff Member	\$15.00	\$180.00		
12/18/2017	Vincent Cevasco Sacramento, CA 95814	IND COM OTH PTY SCC	California Faculty Association Staff Member	\$15.00	\$180.00		

San Francisco State University Faculty Member

IND

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SUBTOTAL

\$15.00

\$180.00

*Contributor Codes

IND - Individual

7/31/2017

COM - Recipient Committee (other than PTY or SCC)

OTH - Other

PTY - Political Party

SCC - Small Contributor Committee

Susan Y. Chen

San Francisco, CA 94132

Type or print in ink. Amounts may be rounded

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Monetary Contributions Received		to whole dollars.		Statement covers period from 07/01/2017		CALIFORNIA 460	
SEE INSTRUCTIO	NS ON REVERSE			through	7	Page	of 142
NAME OF FILER Faculty for Our Un	niversity's Future, Local Committee, sponsored by the California Fact	ulty Association				I.D. N 12337	umber 22
DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO CALENDAR Y (JAN. 1 - DEC.	EAR	PER ELECTION TO DATE (IF REQUIRED)
8/28/2017	Susan Y. Chen San Francisco, CA 94132	■ IND □ COM □ OTH □ PTY □ SCC	San Francisco State University Faculty Member	\$15.00	\$180.00		
9/14/2017	Susan Y. Chen San Francisco, CA 94132	IND COM OTH PTY SCC	San Francisco State University Faculty Member	\$15.00	\$180.00		
10/9/2017	Susan Y. Chen San Francisco, CA 94132	IND COM OTH PTY SCC	San Francisco State University Faculty Member	\$15.00	\$180.00		

IND

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San Francisco State University Faculty Member

San Francisco State University Faculty Member

\$180.00

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*Contributor Codes

IND - Individual

12/4/2017

12/18/2017

COM - Recipient Committee (other than PTY or SCC)

Susan Y. Chen

Susan Y. Chen

San Francisco, CA 94132

San Francisco, CA 94132

OTH - Other

PTY - Political Party

SCC - Small Contributor Committee

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Amounts may be rounded

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Monetary Contributions Received			whole dollars.	Statement cover	•	CALIFORNIA 460	
SEE INSTRUCTIONS C	ON REVERSE			through 12/31/2017	7	Page	25 of 142
NAME OF FILER Faculty for Our Univers	sity's Future, Local Committee, sponsored by the California Facul	ty Association				I.D. No 123372	
DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO CALENDAR Y (JAN. 1 - DEC.	EAR	PER ELECTION TO DATE (IF REQUIRED)

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
7/31/2017	Dorothy C. Chen-Maynard San Bernardino, CA 92407	IND COM OTH PTY SCC	California State University, San Bernardino Faculty Member	\$25.00	\$300.00	
8/28/2017	Dorothy C. Chen-Maynard San Bernardino, CA 92407	IND COM OTH PTY SCC	California State University, San Bernardino Faculty Member	\$25.00	\$300.00	
9/14/2017	Dorothy C. Chen-Maynard San Bernardino, CA 92407	IND COM OTH PTY SCC	California State University, San Bernardino Faculty Member	\$25.00	\$300.00	
10/9/2017	Dorothy C. Chen-Maynard San Bernardino, CA 92407	IND COM OTH PTY SCC	California State University, San Bernardino Faculty Member	\$25.00	\$300.00	
12/4/2017	Dorothy C. Chen-Maynard San Bernardino, CA 92407	IND COM OTH PTY SCC	California State University, San Bernardino Faculty Member	\$25.00	\$300.00	

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*Contributor Codes

IND - Individual

COM - Recipient Committee (other than PTY or SCC)

OTH - Other

PTY - Political Party

SCC - Small Contributor Committee

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Amounts may be rounded

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Statement covers period

Monotary	Contributions Reconved	to	whole dollars.	from 07/01/201			ORM 40U
SEE INSTRUCTION	ONS ON REVERSE			through12/31/201	.7	Page .	26 of 142
NAME OF FILER Faculty for Our U	Jniversity's Future, Local Committee, sponsored by the California Fac	ulty Association				I.D. No 123372	
DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO CALENDAR YE (JAN. 1 - DEC.	AR	PER ELECTION TO DATE (IF REQUIRED)
12/18/2017	Dorothy C. Chen-Maynard San Bernardino, CA 92407	IND COM OTH PTY SCC	California State University, San Bernardino Faculty Member	\$25.00	\$300.00		
7/31/2017	Jennifer L. Colby Seaside, CA 93955	IND COM OTH PTY SCC	California State Unversity, Monterey Bay Faculty Member	\$15.00	\$165.00		
8/28/2017	Jennifer L. Colby Seaside, CA 93955	IND COM OTH PTY SCC	California State Unversity, Monterey Bay Faculty Member	\$15.00	\$165.00		
9/14/2017	Jennifer L. Colby Seaside, CA 93955	IND COM OTH PTY SCC	California State Unversity, Monterey Bay Faculty Member	\$15.00	\$165.00		
12/4/2017	Jennifer L. Colby Seaside, CA 93955	IND COM	California State Unversity, Monterey Bay Faculty Member	\$15.00	\$165.00		

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*Contributor Codes

IND - Individual

COM - Recipient Committee (other than PTY or SCC)

OTH - Other

PTY - Political Party

SCC - Small Contributor Committee

Type or print in ink.
Amounts may be rounded

SCHEDULE A (CONT.)

Monetary Contributions Received			nts may be rounded o whole dollars.	Statement cov from 07/01/201	7	CAL F	iFORNIA 460
SEE INSTRUCTION	ONS ON REVERSE			through	7	Page	<u>27</u> of 142
NAME OF FILER Faculty for Our U	niversity's Future, Local Committee, sponsored by the California Fa	culty Association				I.D. N 12337	lumber 22
DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO CALENDAR YI (JAN. 1 - DEC.	EAR	PER ELECTION TO DATE (IF REQUIRED)
12/18/2017	Jennifer L. Colby Seaside, CA 93955	IND COM OTH PTY SCC	California State Unversity, Monterey Bay Faculty Member	\$15.00	\$165.00		
7/31/2017	Christine A. Cruz-Boone Bakersfield, CA 93311	IND COM OTH PTY SCC	California State University, Bakersfield Faculty Member	\$15.00	\$135.00		
8/28/2017	Christine A. Cruz-Boone Bakersfield, CA 93311	IND COM OTH PTY SCC	California State University, Bakersfield Faculty Member	\$15.00	\$135.00		
9/14/2017	Christine A. Cruz-Boone Bakersfield, CA 93311	IND COM	California State University, Bakersfield	\$15.00	\$135.00		

Faculty Member

California State University, Monterey Bay Faculty Member

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\$15.00

*Contributor Codes

IND - Individual

7/31/2017

COM - Recipient Committee (other than PTY or SCC)

OTH - Other

PTY - Political Party

SCC - Small Contributor Committee

Karen Davis

Seaside, CA 93955

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Amounts may be rounded to whole dollars.

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Statement covers period

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SEE INSTRUCTION	ONS ON REVERSE			through12/31/201	17	Page _	28 of 142
NAME OF FILER Faculty for Our U	niversity's Future, Local Committee, sponsored by the California Fa	culty Association				I.D. Nu 123372	
DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO CALENDAR YE (JAN. 1 - DEC.	AR	PER ELECTION TO DATE (IF REQUIRED)
8/28/2017	Karen Davis Seaside, CA 93955	■ IND □ COM □ OTH □ PTY □ SCC	California State University, Monterey Bay Faculty Member	\$15.00	\$180.00		
9/14/2017	Karen Davis Seaside, CA 93955	IND COM OTH PTY SCC	California State University, Monterey Bay Faculty Member	\$15.00	\$180.00		
10/9/2017	Karen Davis Seaside, CA 93955	IND COM OTH PTY SCC	California State University, Monterey Bay Faculty Member	\$15.00	\$180.00		
12/4/2017	Karen Davis Seaside, CA 93955	■ IND □ COM □ OTH □ PTY □ SCC	California State University, Monterey Bay Faculty Member	\$15.00	\$180.00		
12/18/2017	Karen Davis Seaside, CA 93955	IND COM OTH PTY	California State University, Monterey Bay Faculty Member	\$15.00	\$180.00		

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SUBTOTAL

*Contributor Codes

IND - Individual

COM - Recipient Committee (other than PTY or SCC)

OTH - Other

PTY - Political Party

Schedule A (Continuation Sheet)

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Monetary	netary Contributions Received to whole dollars. Statement covers per from 07/01/2017		CALIFORNIA		FORNIA 460		
SEE INSTRUCTIO	ONS ON REVERSE			through12/31/201	7	Page	
NAME OF FILER Faculty for Our U	niversity's Future, Local Committee, sponsored by the California Fac	culty Association				I.D. No 123372	
DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO CALENDAR Y (JAN. 1 - DEC	EAR	PER ELECTION TO DATE (IF REQUIRED)
7/31/2017	Djibril Diop Sacramento, CA 95814	IND COM OTH PTY SCC	California Faculty Association Staff Member	\$25.00	\$300.00		
8/28/2017	Djibril Diop Sacramento, CA 95814	IND COM OTH PTY SCC	California Faculty Association Staff Member	\$25.00	\$300.00		
9/14/2017	Djibril Diop Sacramento, CA 95814	IND COM OTH PTY SCC	California Faculty Association Staff Member	\$25.00	\$300.00		
10/9/2017	Djibril Diop Sacramento, CA 95814	IND COM OTH PTY SCC	California Faculty Association Staff Member	\$25.00	\$300.00		

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\$25.00

\$300.00

California Faculty Association Staff Member

*Contributor Codes

IND - Individual

12/4/2017

COM - Recipient Committee (other than PTY or SCC)

Djibril Diop Sacramento, CA 95814

OTH - Other

PTY - Political Party

SCC - Small Contributor Committee

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Amounts may be rounded

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Monetary Contributions Received		to whole dollars.		from 07/01/201	•	CALIFORNIA 460		
SEE INSTRUCTION	NS ON REVERSE			through12/31/2017	7	Page	_30 of 142	
NAME OF FILER Faculty for Our University's Future, Local Committee, sponsored by the California Faculty Association						I.D. N 12337	umber 22	
DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO CALENDAR YE (JAN. 1 - DEC.	AR	PER ELECTION TO DATE (IF REQUIRED)	
12/18/2017	Djibril Diop Sacramento, CA 95814	IND COM OTH	California Faculty Association Staff Member	\$25.00	\$300.00			

RECEIVED	AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE *	OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	PERIOD	CALENDAR YEAR (JAN. 1 - DEC. 31)	TO DATE (IF REQUIRED)
12/18/2017	Djibril Diop Sacramento, CA 95814	IND COM OTH PTY SCC	California Faculty Association Staff Member	\$25.00	\$300.00	
7/31/2017	Douglas Domingo-Foraste Long Beach, CA 90804	IND COM OTH PTY SCC	California State University, Long Beach Faculty Member	\$25.00	\$300.00	
8/28/2017	Douglas Domingo-Foraste Long Beach, CA 90804	IND COM OTH PTY SCC	California State University, Long Beach Faculty Member	\$25.00	\$300.00	
9/14/2017	Douglas Domingo-Foraste Long Beach, CA 90804	IND COM OTH PTY SCC	California State University, Long Beach Faculty Member	\$25.00	\$300.00	
10/9/2017	Douglas Domingo-Foraste Long Beach, CA 90804	IND COM OTH PTY SCC	California State University, Long Beach Faculty Member	\$25.00	\$300.00	

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*Contributor Codes

IND - Individual

COM - Recipient Committee (other than PTY or SCC)

OTH - Other

PTY - Political Party

SCC - Small Contributor Committee

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Amounts may be rounded to whole dollars.

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Statement covers period

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SEE INSTRUCTION	DNS ON REVERSE			through	17	Page 3	of_142
NAME OF FILER Faculty for Our U	University's Future, Local Committee, sponsored by the California Fa	eculty Association				I.D. Num 1233722	nber
DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO I CALENDAR YEA (JAN. 1 - DEC. 3	AR	PER ELECTION TO DATE (IF REQUIRED)
12/4/2017	Douglas Domingo-Foraste Long Beach, CA 90804	■ IND □ COM □ OTH □ PTY □ SCC	California State University, Long Beach Faculty Member	\$25.00	\$300.00		
12/18/2017	Douglas Domingo-Foraste Long Beach, CA 90804	IND COM OTH PTY	California State University, Long Beach Faculty Member	\$25.00	\$300.00		
7/31/2017	John T. Donovan Los Angeles, CA 90032	IND COM OTH PTY SCC	California State University, Los Angeles Faculty Member	\$40.00	\$480.00		
8/28/2017	John T. Donovan Los Angeles, CA 90032	IND COM OTH PTY SCC	California State University, Los Angeles Faculty Member	\$40.00	\$480.00		
9/14/2017	John T. Donovan Los Angeles, CA 90032	IND COM OTH PTY	California State University, Los Angeles Faculty Member	\$40.00	\$480.00		

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SUBTOTAL

*Contributor Codes

IND - Individual

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OTH - Other

PTY - Political Party

SCC - Small Contributor Committee

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Statement covers period

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SEE INSTRUCTION	DNS ON REVERSE			through12/31/201	17	Page	32 of 142
NAME OF FILER Faculty for Our U	niversity's Future, Local Committee, sponsored by the California Fa	culty Association				I.D. N 12337	umber 22
DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO CALENDAR Y (JAN. 1 - DEC.	EAR	PER ELECTION TO DATE (IF REQUIRED)
10/9/2017	John T. Donovan Los Angeles, CA 90032	■ IND □ COM □ OTH □ PTY □ SCC	California State University, Los Angeles Faculty Member	\$40.00	\$480.00		
12/4/2017	John T. Donovan Los Angeles, CA 90032	IND COM OTH PTY SCC	California State University, Los Angeles Faculty Member	\$40.00	\$480.00		
12/18/2017	John T. Donovan Los Angeles, CA 90032	IND COM OTH PTY SCC	California State University, Los Angeles Faculty Member	\$40.00	\$480.00		
7/31/2017	Jennifer L. Eagan Hayward, CA 94543	IND COM OTH PTY SCC	California State University, East Bay Faculty Member	\$75.00	\$900.00		
8/28/2017	Jennifer L. Eagan Hayward, CA 94543	IND COM OTH PTY	California State University, East Bay Faculty Member	\$75.00	\$900.00		

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SUBTOTAL

*Contributor Codes

IND - Individual

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OTH - Other

PTY - Political Party

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Monetary Contributions Received	to whole dollars.	Statement cov	•	CALIFORI FORM	^{NIA} 460
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SEE INSTRUCTIONS ON REVERSE		through12/31/201	<i>I</i>	Page <u>33</u>	of_142
NAME OF FILER				I.D. Number	
aculty for Our University's Future, Local Committee, sponsored by the California Faculty	Association			1233722	
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FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
Jennifer L. Eagan Hayward, CA 94543	IND COM OTH PTY SCC	California State University, East Bay Faculty Member	\$75.00	\$900.00	
Jennifer L. Eagan Hayward, CA 94543	IND COM OTH PTY SCC	California State University, East Bay Faculty Member	\$75.00	\$900.00	
Jennifer L. Eagan Hayward, CA 94543	IND COM OTH PTY SCC	California State University, East Bay Faculty Member	\$75.00	\$900.00	
Jennifer L. Eagan Hayward, CA 94543	IND COM OTH PTY SCC	California State University, East Bay Faculty Member	\$75.00	\$900.00	
Sharon Elise San Marcos, CA 92096	IND COM OTH PTY SCC	California State University, San Marcos Faculty Member	\$50.00	\$600.00	
	AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER) Jennifer L. Eagan Hayward, CA 94543 Jennifer L. Eagan Hayward, CA 94543 Jennifer L. Eagan Hayward, CA 94543 Jennifer L. Eagan Hayward, CA 94543	AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER) Jennifer L. Eagan Hayward, CA 94543 Jennifer L. Eagan Hayward, CA 94543	AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER) Jennifer L. Eagan Hayward, CA 94543 Jennifer L. Eagan	AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER) Jennifer L. Eagan Hayward, CA 94543 Jennifer L. Eagan	CONTRIBUTOR (IF COMMITTEE, ALSO ENTER LD. NUMBER) Jennifer L. Eagan Hayward, CA 94543 Jennifer L. Eagan Hayward, CA 9454

SUBTOTAL

*Contributor Codes

IND - Individual

COM - Recipient Committee (other than PTY or SCC)

OTH - Other

PTY - Political Party

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Amounts may be rounded

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Monetary	Contributions Received		nts may be rounded whole dollars.	Statement covers per from 07/01/2017		CALIFORNIA 46 FORM Page 34 of 142	
SEE INSTRUCTION	ONS ON REVERSE		through	7			
NAME OF FILER Faculty for Our U	niversity's Future, Local Committee, sponsored by the California Fac	culty Association				I.D. Nu 123372	
DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO CALENDAR YE (JAN. 1 - DEC.	AR	PER ELECTION TO DATE (IF REQUIRED)
8/28/2017	Sharon Elise San Marcos, CA 92096	IND COM OTH PTY SCC	California State University, San Marcos Faculty Member	\$50.00	\$600.00		
9/14/2017	Sharon Elise San Marcos, CA 92096	IND COM OTH PTY SCC	California State University, San Marcos Faculty Member	\$50.00	\$600.00		
10/9/2017	Sharon Elise San Marcos, CA 92096	IND COM OTH PTY SCC	California State University, San Marcos Faculty Member	\$50.00	\$600.00		
12/4/2017	Sharon Elise San Marcos, CA 92096	IND COM OTH PTY SCC	California State University, San Marcos Faculty Member	\$50.00	\$600.00		
12/18/2017	Sharon Elise San Marcos, CA 92096	IND COM OTH PTY SCC	California State University, San Marcos Faculty Member	\$50.00	\$600.00		

SUBTOTAL

*Contributor Codes

IND - Individual

COM - Recipient Committee (other than PTY or SCC)

OTH - Other

PTY - Political Party

SCC - Small Contributor Committee

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Statement covers period

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SEE INSTRUCTIO	DNS ON REVERSE			through12/31/201	7	Page	35 of 142
NAME OF FILER Faculty for Our University's Future, Local Committee, sponsored by the California Faculty Association						I.D. Number 1233722	
DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO CALENDAR Y (JAN. 1 - DEC	EAR	PER ELECTION TO DATE (IF REQUIRED)
7/31/2017	Darel T. Engen San Marcos, CA 92096	IND COM OTH PTY SCC	California State University, San Marcos Faculty Member	\$20.00	\$240.00		
8/28/2017	Darel T. Engen San Marcos, CA 92096	IND COM OTH PTY SCC	California State University, San Marcos Faculty Member	\$20.00	\$240.00		
9/14/2017	Darel T. Engen San Marcos, CA 92096	IND COM OTH PTY SCC	California State University, San Marcos Faculty Member	\$20.00	\$240.00		
10/9/2017	Darel T. Engen San Marcos, CA 92096	IND COM OTH PTY	California State University, San Marcos Faculty Member	\$20.00	\$240.00		

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California State University, San Marcos Faculty Member

*Contributor Codes

IND - Individual

12/4/2017

COM - Recipient Committee (other than PTY or SCC)

OTH - Other

PTY - Political Party

SCC - Small Contributor Committee

Darel T. Engen San Marcos, CA 92096

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Amounts may be rounded

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Monetary Contributions Received			whole dollars.	Statement cov. 67/01/201	•	CALIFORNIA 460		
SEE INSTRUCTION	IS ON REVERSE			through12/31/201	7	Page	36 of 142	
NAME OF FILER						I.D. N	umber	
Faculty for Our Uni	versity's Future, Local Committee, sponsored by the California Faculty	y Association				12337	22	
DATE	FULL NAME, MAILING ADDRESS	CONTRIBUTOR	IF AN INDIVIDUAL, ENTER	AMOUNT	CUMULATIVE TO		PER ELECTION	

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
12/18/2017	Darel T. Engen San Marcos, CA 92096	IND COM OTH PTY SCC	California State University, San Marcos Faculty Member	\$20.00	\$240.00	
7/31/2017	Steven M. Filling Turlock, CA 95382	IND COM OTH PTY SCC	California State University, Stanislaus Faculty Member	\$50.00	\$600.00	
8/28/2017	Steven M. Filling Turlock, CA 95382	IND COM OTH PTY SCC	California State University, Stanislaus Faculty Member	\$50.00	\$600.00	
9/14/2017	Steven M. Filling Turlock, CA 95382	IND COM OTH PTY SCC	California State University, Stanislaus Faculty Member	\$50.00	\$600.00	
10/9/2017	Steven M. Filling Turlock, CA 95382	IND COM OTH PTY SCC	California State University, Stanislaus Faculty Member	\$50.00	\$600.00	

SUBTOTAL

*Contributor Codes

IND - Individual

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OTH - Other

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Amounts may be rounded

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Monetary	Contributions Received		nts may be rounded whole dollars.	Statement cov	•	CALI F	FORNIA 460
SEE INSTRUCTIO	ONS ON REVERSE			through	7	Page .	37 of 142
NAME OF FILER Faculty for Our U	niversity's Future, Local Committee, sponsored by the California Fac	culty Association				I.D. Nu 123372	
DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO CALENDAR YE (JAN. 1 - DEC.	AR	PER ELECTION TO DATE (IF REQUIRED)
12/4/2017	Steven M. Filling Turlock, CA 95382	IND COM OTH PTY SCC	California State University, Stanislaus Faculty Member	\$50.00	\$600.00		
12/18/2017	Steven M. Filling Turlock, CA 95382	IND COM OTH PTY SCC	California State University, Stanislaus Faculty Member	\$50.00	\$600.00		
7/31/2017	Niesha Fritz Sacramento, CA 95814	IND COM OTH PTY SCC	California Faculty Association Staff Member	\$15.00	\$180.00		
8/28/2017	Niesha Fritz Sacramento, CA 95814	IND COM OTH PTY SCC	California Faculty Association Staff Member	\$15.00	\$180.00		
9/14/2017	Niesha Fritz Sacramento, CA 95814	IND COM OTH PTY SCC	California Faculty Association Staff Member	\$15.00	\$180.00		

SUBTOTAL

*Contributor Codes

IND - Individual

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OTH - Other

PTY - Political Party

SCC - Small Contributor Committee

Type or print in ink.
Amounts may be rounded

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Statement covers period

·	Contributions Received	to	whole dollars.	from07/01/2017 through12/31/2017		FORM 460 Page 38 of 142	
	ONS ON REVERSE			an ougn			
NAME OF FILER Faculty for Our U	niversity's Future, Local Committee, sponsored by the California Fa	aculty Association				I.D. Nu 123372	
DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO I CALENDAR YEA (JAN. 1 - DEC. 3	AR	PER ELECTION TO DATE (IF REQUIRED)
10/9/2017	Niesha Fritz Sacramento, CA 95814	■ IND □ COM □ OTH □ PTY □ SCC	California Faculty Association Staff Member	\$15.00	\$180.00		
12/4/2017	Niesha Fritz Sacramento, CA 95814	■ IND □ COM □ OTH □ PTY □ SCC	California Faculty Association Staff Member	\$15.00	\$180.00		
12/18/2017	Niesha Fritz Sacramento, CA 95814	IND COM OTH PTY SCC	California Faculty Association Staff Member	\$15.00	\$180.00		
7/31/2017	Elizabeth Galvez-Hard Rohnert Park, CA 94928	■ IND □ COM □ OTH □ PTY □ SCC	California State University, Sonoma Faculty Member	\$25.00	\$300.00		
8/28/2017	Elizabeth Galvez-Hard Rohnert Park, CA 94928	IND COM OTH PTY SCC	California State University, Sonoma Faculty Member	\$25.00	\$300.00		

SUBTOTAL

*Contributor Codes

IND - Individual

COM - Recipient Committee (other than PTY or SCC)

OTH - Other

PTY - Political Party

SCC - Small Contributor Committee

Elizabeth Galvez-Hard Rohnert Park, CA 94928

Kim Geron

Hayward, CA 94542

Type or print in ink. Amounts may be rounded

SCHEDULE A (CONT.)

Monetary Contributions Received			to whole dollars.		ers period	CALIFORNIA 460 FORM	
SEE INSTRUCTIO	NS ON REVERSE			through12/31/2017	7	Page	39 of_142
NAME OF FILER Faculty for Our Ur	niversity's Future, Local Committee, sponsored by the California Facul	lty Association				I.D. No 123372	
DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO CALENDAR YE (JAN. 1 - DEC.	AR	PER ELECTION TO DATE (IF REQUIRED)
9/14/2017	Elizabeth Galvez-Hard Rohnert Park, CA 94928	IND COM OTH PTY SCC	California State University, Sonoma Faculty Member	\$25.00	\$300.00		
10/9/2017	Elizabeth Galvez-Hard Rohnert Park, CA 94928	IND COM OTH PTY SCC	California State University, Sonoma Faculty Member	\$25.00	\$300.00		
12/4/2017	Elizabeth Galvez-Hard Rohnert Park, CA 94928	IND COM	California State University, Sonoma Faculty Member	\$25.00	\$300.00		

California State University,

California State University, East

Sonoma

Faculty Member

Bay Faculty Member

\$25.00

\$60.00

☐ PTY ☐ SCC

IND

☐ COM

OTH PTY SCC **IND**

COM OTH PTY \square scc

SUBTOTAL

\$300.00

\$720.00

*Contributor Codes

IND - Individual

12/18/2017

7/31/2017

COM - Recipient Committee (other than PTY or SCC)

OTH - Other

PTY - Political Party

SCC - Small Contributor Committee

Type or print in ink.
Amounts may be rounded

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Monetary (Contributions Received		whole dollars.	from 07/01/2017	•	CALI F	IFORNIA 460 ORM	
SEE INSTRUCTION	IS ON REVERSE			through 12/31/2017	7	Page	40 of 142	
NAME OF FILER Faculty for Our Uni	versity's Future, Local Committee, sponsored by the California Faculty	Association				I.D. N 123372		
DATE	FULL NAME, MAILING ADDRESS	CONTRIBUTOR	IF AN INDIVIDUAL, ENTER	AMOUNT	CUMULATIVE TO	DATE	PER ELECTION	

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
8/28/2017	Kim Geron Hayward, CA 94542	IND COM OTH PTY SCC	California State University, East Bay Faculty Member	\$60.00	\$720.00	
9/14/2017	Kim Geron Hayward, CA 94542	IND COM OTH PTY SCC	California State University, East Bay Faculty Member	\$60.00	\$720.00	
10/9/2017	Kim Geron Hayward, CA 94542	IND COM OTH PTY SCC	California State University, East Bay Faculty Member	\$60.00	\$720.00	
12/4/2017	Kim Geron Hayward, CA 94542	IND COM OTH PTY SCC	California State University, East Bay Faculty Member	\$60.00	\$720.00	
12/18/2017	Kim Geron Hayward, CA 94542	IND COM OTH PTY SCC	California State University, East Bay Faculty Member	\$60.00	\$720.00	

SUBTOTAL

*Contributor Codes

IND - Individual

COM - Recipient Committee (other than PTY or SCC)

OTH - Other

PTY - Political Party

SCC - Small Contributor Committee

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Amounts may be rounded

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Monetary C	Contributions Received		whole dollars.	Statement cov. 67/01/201		CALI F	FORNIA 460
SEE INSTRUCTIONS	S ON REVERSE			through12/31/201	7	Page	_41of_142
NAME OF FILER Faculty for Our Univ	versity's Future, Local Committee, sponsored by the California Faculty	y Association				I.D. No 123372	
DATE	FULL NAME, MAILING ADDRESS	CONTRIBUTOR	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER	AMOUNT RECEIVED THIS	CUMULATIVE TO	-	PER ELECTION TO DATE

FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
Emma C. Gibson Pomona, CA 91768	IND COM OTH PTY SCC	Cal Poly, Pomona Faculty Member	\$25.00	\$300.00	
Emma C. Gibson Pomona, CA 91768	IND COM OTH PTY SCC	Cal Poly, Pomona Faculty Member	\$25.00	\$300.00	
Emma C. Gibson Pomona, CA 91768	IND COM OTH PTY SCC	Cal Poly, Pomona Faculty Member	\$25.00	\$300.00	
Emma C. Gibson Pomona, CA 91768	IND COM OTH PTY SCC	Cal Poly, Pomona Faculty Member	\$25.00	\$300.00	
Emma C. Gibson Pomona, CA 91768	IND COM OTH PTY SCC	Cal Poly, Pomona Faculty Member	\$25.00	\$300.00	
	AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER) Emma C. Gibson Pomona, CA 91768 Emma C. Gibson Pomona, CA 91768 Emma C. Gibson Pomona, CA 91768 Emma C. Gibson Pomona, CA 91768	AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER) Emma C. Gibson Pomona, CA 91768 IND COM OTH PTY SCC Emma C. Gibson Pomona, CA 91768 IND OTH PTY SCC Emma C. Gibson Pomona, CA 91768 IND OTH PTY SCC Emma C. Gibson Pomona, CA 91768 IND COM OTH PTY SCC	AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER) Emma C. Gibson Pomona, CA 91768 Emma C. Gibson Pomona, CA 91768	AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER) Emma C. Gibson Pomona, CA 91768 Emma C. Gibson Pomona, CA 91768	CONTRIBUTOR (FCOMMITTEE, ALSO ENTER ID. NUMBER)

SUBTOTAL

*Contributor Codes

IND - Individual

COM - Recipient Committee (other than PTY or SCC)

OTH - Other

PTY - Political Party

SCC - Small Contributor Committee

Schedule A (Continuation Sheet)

Susan M. Green

Chico, CA 95929

Susan M. Green

Susan M. Green

Chico, CA 95929

Chico, CA 95929

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Monetary Contributions Received		to whole dollars.		Statement cov	•	CALIFORNIA 460		
SEE INSTRUCTION	NS ON REVERSE			through12/31/201	7	Page	of_ 142	
NAME OF FILER Faculty for Our Uni	iversity's Future, Local Committee, sponsored by the California Faculty	Association				I.D. N 12337		
DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO CALENDAR YE (JAN. 1 - DEC.	AR	PER ELECTION TO DATE (IF REQUIRED)	
12/18/2017	Emma C. Gibson Pomona, CA 91768	IND COM OTH PTY SCC	Cal Poly, Pomona Faculty Member	\$25.00	\$300.00			
7/31/2017	Susan M. Green Chico, CA 95929	IND COM	California State University, Chico Faculty Member	\$100.00	\$1,200.00			

California State University, Chico

California State University, Chico Faculty Member

California State University, Chico Faculty Member

Faculty Member

\$100.00

\$100.00

\$100.00

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COM OTH PTY □ scc

□ сом OTH PTY SCC

COM ОТН □ PTY ☐ SCC

SUBTOTAL	-	

\$1,200.00

\$1,200.00

\$1,200.00

*Contributor Codes

IND - Individual

8/28/2017

9/14/2017

10/9/2017

COM - Recipient Committee (other than PTY or SCC)

OTH - Other

PTY - Political Party

SCC - Small Contributor Committee

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Statement covers period

Monetary Contributions Received		to	whole dollars.	from07/01/2017 through12/31/2017		FORM 460 Page 43 of 142		
NAME OF FILER	ONS ON REVERSE			un ougn		I.D. Nur		
Faculty for Our U	niversity's Future, Local Committee, sponsored by the California Fa	culty Association				1233722	2	
DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO D CALENDAR YEA (JAN. 1 - DEC. 3	AR	PER ELECTION TO DATE (IF REQUIRED)	
12/4/2017	Susan M. Green Chico, CA 95929	■ IND □ COM □ OTH □ PTY □ SCC	California State University, Chico Faculty Member	\$100.00	\$1,200.00			
12/18/2017	Susan M. Green Chico, CA 95929	■ IND □ COM □ OTH □ PTY □ SCC	California State University, Chico Faculty Member	\$100.00	\$1,200.00			
7/31/2017	Leslie K. Grier Fullerton, CA 92831	IND COM OTH PTY SCC	California State University, Fullerton Faculty Member	\$15.00	\$180.00			
8/28/2017	Leslie K. Grier Fullerton, CA 92831	IND COM OTH PTY SCC	California State University, Fullerton Faculty Member	\$15.00	\$180.00			
9/14/2017	Leslie K. Grier Fullerton, CA 92831	IND COM OTH PTY SCC	California State University, Fullerton Faculty Member	\$15.00	\$180.00			

*Contributor Codes

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OTH - Other

PTY - Political Party

SCC - Small Contributor Committee

SUBTOTAL

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Amounts may be rounded

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Monetary Contributions Received			to whole dollars.		vers period	CALIFORNIA 460		
SEE INSTRUCTIO	ONS ON REVERSE			through	7	Page _	of 142	
NAME OF FILER Faculty for Our U	niversity's Future, Local Committee, sponsored by the California Fa	culty Association				I.D. Nu 123372		
DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO CALENDAR YE (JAN. 1 - DEC.	AR	PER ELECTION TO DATE (IF REQUIRED)	
10/9/2017	Leslie K. Grier Fullerton, CA 92831	IND COM OTH PTY SCC	California State University, Fullerton Faculty Member	\$15.00	\$180.00			
12/4/2017	Leslie K. Grier Fullerton, CA 92831	IND COM OTH PTY SCC	California State University, Fullerton Faculty Member	\$15.00	\$180.00			
12/18/2017	Leslie K. Grier Fullerton, CA 92831	IND COM OTH PTY SCC	California State University, Fullerton Faculty Member	\$15.00	\$180.00			
7/31/2017	John J. Griffin Camarillo, CA 93012	IND COM OTH PTY SCC	California State University, Channel Islands Faculty Member	\$50.00	\$600.00			
8/28/2017	John J. Griffin Camarillo, CA 93012	IND COM OTH PTY SCC	California State University, Channel Islands Faculty Member	\$50.00	\$600.00			

SUBTOTAL

*Contributor Codes

IND - Individual

COM - Recipient Committee (other than PTY or SCC)

OTH - Other

PTY - Political Party

SCC - Small Contributor Committee

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Amounts may be rounded

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Monetary Contributions Received			to whole dollars.		vers period	CALIFORNIA 460		
SEE INSTRUCTIO	DNS ON REVERSE			through	7	Page _	45 of 142	
NAME OF FILER	niversity's Future, Local Committee, sponsored by the California Fac	culty Association				I.D. Nu 123372		
DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO CALENDAR YE (JAN. 1 - DEC.	AR	PER ELECTION TO DATE (IF REQUIRED)	
9/14/2017	John J. Griffin Camarillo, CA 93012	IND COM OTH PTY SCC	California State University, Channel Islands Faculty Member	\$50.00	\$600.00			
10/9/2017	John J. Griffin Camarillo, CA 93012	IND COM OTH PTY	California State University, Channel Islands Faculty Member	\$50.00	\$600.00			
12/4/2017	John J. Griffin Camarillo, CA 93012	IND COM OTH PTY	California State University, Channel Islands Faculty Member	\$50.00	\$600.00			
12/18/2017	John J. Griffin Camarillo, CA 93012	IND COM OTH PTY SCC	California State University, Channel Islands Faculty Member	\$50.00	\$600.00			
7/31/2017	Rachel S. Grimshaw Turlock, CA 95382	IND COM OTH PTY	California State University, Stanislaus Faculty Member	\$25.00	\$300.00			

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*Contributor Codes

IND - Individual

COM - Recipient Committee (other than PTY or SCC)

OTH - Other

PTY - Political Party

SCC - Small Contributor Committee

Schedule A (Continuation Sheet)

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Amounts may be rounded

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Monetary Contributions Received			whole dollars.	Statement cover from 07/01/201	•	CALIFORNIA 460		
SEE INSTRUCTION	IS ON REVERSE	through12/31/2017			Page <u>46</u> of <u>142</u>			
NAME OF FILER Faculty for Our University	versity's Future, Local Committee, sponsored by the California Faculty	y Association				I.D. No 123372		
DATE	FULL NAME, MAILING ADDRESS	CONTRIBUTOR	IF AN INDIVIDUAL, ENTER	AMOUNT	CUMULATIVE TO		PER ELECTION	

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
8/28/2017	Rachel S. Grimshaw Turlock, CA 95382	IND COM OTH PTY SCC	California State University, Stanislaus Faculty Member	\$25.00	\$300.00	
9/14/2017	Rachel S. Grimshaw Turlock, CA 95382	IND COM OTH PTY SCC	California State University, Stanislaus Faculty Member	\$25.00	\$300.00	
10/9/2017	Rachel S. Grimshaw Turlock, CA 95382	IND COM OTH PTY SCC	California State University, Stanislaus Faculty Member	\$25.00	\$300.00	
12/4/2017	Rachel S. Grimshaw Turlock, CA 95382	IND COM OTH PTY SCC	California State University, Stanislaus Faculty Member	\$25.00	\$300.00	
12/18/2017	Rachel S. Grimshaw Turlock, CA 95382	IND COM OTH PTY SCC	California State University, Stanislaus Faculty Member	\$25.00	\$300.00	

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*Contributor Codes

IND - Individual

COM - Recipient Committee (other than PTY or SCC)

OTH - Other

PTY - Political Party SCC - Small Contributor Committee

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Monetary Contributions Received			to whole dollars.		ers period	CALIFORNIA 460		
SEE INSTRUCTION	NS ON REVERSE			through12/31/2017	,	Page	_47 of_142	
NAME OF FILER Faculty for Our University's Future, Local Committee, sponsored by the California Faculty Association						I.D. N 12337	umber 22	
	relating of a times, 200 and Committees, spondored by the Camilonian racting	T ISSOCIATION				1200,		
DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO CALENDAR YE (JAN. 1 - DEC.	AR	PER ELECTION TO DATE (IF REQUIRED)	
7/31/2017	Richard P. Groper Los Angeles, CA 90032	IND COM OTH PTY SCC	California State University, Los Angeles Faculty Member	\$15.00	\$180.00			

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12/4/2017	Richard P. Groper Los Angeles, CA 90032	IND COM OTH PTY SCC	California State University, Los Angeles Faculty Member	\$15.00	\$180.00	
10/9/2017	Richard P. Groper Los Angeles, CA 90032	IND COM OTH PTY SCC	California State University, Los Angeles Faculty Member	\$15.00	\$180.00	
9/14/2017	Richard P. Groper Los Angeles, CA 90032	IND COM OTH PTY SCC	California State University, Los Angeles Faculty Member	\$15.00	\$180.00	
8/28/2017	Richard P. Groper Los Angeles, CA 90032	IND COM OTH PTY SCC	California State University, Los Angeles Faculty Member	\$15.00	\$180.00	
	Los Angeles, CA 90032	COM OTH PTY SCC	Angeles Faculty Member			

*Contributor Codes

IND - Individual

COM - Recipient Committee (other than PTY or SCC)

OTH - Other

PTY - Political Party

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Statement covers period

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SEE INSTRUCTION	DNS ON REVERSE			through	7	Page	_48 of_142
NAME OF FILER Faculty for Our U	Iniversity's Future, Local Committee, sponsored by the California Facu	ulty Association				I.D. N 12337	umber 22
DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO CALENDAR Y (JAN. 1 - DEC.	EAR	PER ELECTION TO DATE (IF REQUIRED)
12/18/2017	Richard P. Groper Los Angeles, CA 90032	IND COM OTH PTY SCC	California State University, Los Angeles Faculty Member	\$15.00	\$180.00		
9/14/2017	Mario Guerrero Sacramento, CA 95814	IND COM OTH PTY SCC	California Faculty Association Staff Member	\$25.00	\$100.00		
10/9/2017	Mario Guerrero Sacramento, CA 95814	IND COM OTH PTY SCC	California Faculty Association Staff Member	\$25.00	\$100.00		
12/4/2017	Mario Guerrero Sacramento, CA 95814	■ IND □ COM □ OTH □ PTY □ SCC	California Faculty Association Staff Member	\$25.00	\$100.00		
12/18/2017	Mario Guerrero Sacramento, CA 95814	IND COM	California Faculty Association Staff Member	\$25.00	\$100.00		

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*Contributor Codes

IND - Individual

COM - Recipient Committee (other than PTY or SCC)

OTH - Other

PTY - Political Party

SCC - Small Contributor Committee

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Amounts may be rounded

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Monetary Contributions Received	to	to whole dollars.			Statement covers period from 07/01/2017			460
SEE INSTRUCTIONS ON REVERSE			through	12/31/2017	1	Page	_49o	of 142
NAME OF FILER Faculty for Our University's Future, Local Committee, sponsored by the California Facu	alty Association					I.D. No 123372		
		15 AND 10 (18) (18)			0		250 51	FOTION

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
7/31/2017	John Halcon San Marcos, CA 92096	IND COM OTH PTY SCC	California State University, San Marcos Faculty Member	\$50.00	\$600.00	
8/28/2017	John Halcon San Marcos, CA 92096	IND COM OTH PTY SCC	California State University, San Marcos Faculty Member	\$50.00	\$600.00	
9/14/2017	John Halcon San Marcos, CA 92096	IND COM OTH PTY SCC	California State University, San Marcos Faculty Member	\$50.00	\$600.00	
10/9/2017	John Halcon San Marcos, CA 92096	IND COM OTH PTY SCC	California State University, San Marcos Faculty Member	\$50.00	\$600.00	
12/4/2017	John Halcon San Marcos, CA 92096	IND COM OTH PTY SCC	California State University, San Marcos Faculty Member	\$50.00	\$600.00	

SUBTOTAL

*Contributor Codes

IND - Individual

COM - Recipient Committee (other than PTY or SCC)

OTH - Other

PTY - Political Party

SCC - Small Contributor Committee

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NAME OF FILER Faculty for Our U	iniversity's Future, Local Committee, sponsored by the California Facu	lty Association		1		I.D. N 12337	umber 22
DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO CALENDAR YE (JAN. 1 - DEC. 3	AR	PER ELECTION TO DATE (IF REQUIRED)
12/18/2017	John Halcon San Marcos, CA 92096	IND COM OTH PTY SCC	California State University, San Marcos Faculty Member	\$50.00	\$600.00		
7/31/2017	Margaret Harris Hayward, CA 94543	IND COM OTH PTY SCC	California State University, East Bay Faculty Member	\$15.00	\$180.00		
8/28/2017	Margaret Harris Hayward, CA 94543	IND COM OTH PTY SCC	California State University, East Bay Faculty Member	\$15.00	\$180.00		
9/14/2017	Margaret Harris Hayward, CA 94543	IND COM OTH PTY SCC	California State University, East Bay Faculty Member	\$15.00	\$180.00		
10/9/2017	Margaret Harris Hayward, CA 94543	IND COM	California State University, East Bay	\$15.00	\$180.00		

Bay Faculty Member

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*Contributor Codes

IND - Individual

COM - Recipient Committee (other than PTY or SCC)

OTH - Other

PTY - Political Party

SCC - Small Contributor Committee

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Statement covers period

Monetary	Contributions Received		o whole dollars.	Statement cov	•		FORNIA 460
	DNS ON REVERSE			through 12/31/201	7	Page _	
NAME OF FILER Faculty for Our U	Iniversity's Future, Local Committee, sponsored by the California Fa	aculty Association				I.D. Nu 123372	
DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO CALENDAR YE (JAN. 1 - DEC.	AR	PER ELECTION TO DATE (IF REQUIRED)
12/4/2017	Margaret Harris Hayward, CA 94543	IND COM OTH PTY SCC	California State University, East Bay Faculty Member	\$15.00	\$180.00		
12/18/2017	Margaret Harris Hayward, CA 94543	IND COM OTH PTY	California State University, East Bay Faculty Member	\$15.00	\$180.00		
7/31/2017	Paul Harris Sacramento, CA 95814	IND COM OTH PTY SCC	California Faculty Association Staff Member	\$35.00	\$420.00		
8/28/2017	Paul Harris Sacramento, CA 95814	IND COM OTH PTY SCC	California Faculty Association Staff Member	\$35.00	\$420.00		
9/14/2017	Paul Harris Sacramento, CA 95814	■ IND □ COM	California Faculty Association Staff Member	\$35.00	\$420.00		

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SUBTOTAL

*Contributor Codes

IND - Individual

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OTH - Other

PTY - Political Party

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Amounts may be rounded to whole dollars.

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Statement covers period

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SEE INSTRUCTION	ONS ON REVERSE			through12/31/201	7	Page	_52 of _142
NAME OF FILER Faculty for Our U	niversity's Future, Local Committee, sponsored by the California Fa	culty Association				I.D. N 12337	umber 22
DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO CALENDAR YI (JAN. 1 - DEC.	EAR	PER ELECTION TO DATE (IF REQUIRED)
10/9/2017	Paul Harris Sacramento, CA 95814	■ IND □ COM □ OTH □ PTY □ SCC	California Faculty Association Staff Member	\$35.00	\$420.00		
12/4/2017	Paul Harris Sacramento, CA 95814	■ IND □ COM □ OTH □ PTY □ SCC	California Faculty Association Staff Member	\$35.00	\$420.00		
12/18/2017	Paul Harris Sacramento, CA 95814	IND COM OTH PTY SCC	California Faculty Association Staff Member	\$35.00	\$420.00		
7/31/2017	Bruce D. Hartsell Bakersfield, CA 93311	IND COM OTH PTY SCC	California State University, Bakersfield Faculty Member	\$20.00	\$240.00		

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\$20.00

\$240.00

California State University, Bakersfield Faculty Member

IND

☐ COM ☐ OTH ☐ PTY ☐ SCC

*Contributor Codes

IND - Individual

8/28/2017

COM - Recipient Committee (other than PTY or SCC)

OTH - Other

PTY - Political Party

SCC - Small Contributor Committee

Bruce D. Hartsell

Bakersfield, CA 93311

Type or print in ink.
Amounts may be rounded

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Monetary Contributions Received		to	whole dollars.	from 07/01/2017	•	CALIFORNIA 460	
SEE INSTRUCTION	NS ON REVERSE			through 12/31/2017	7	Page	_53 of 142
NAME OF FILER Faculty for Our Uni	iversity's Future, Local Committee, sponsored by the California Faculty	Association				I.D. N 123372	lumber 22
DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO CALENDAR YE (JAN. 1 - DEC.	EAR	PER ELECTION TO DATE (IF REQUIRED)
9/14/2017	Bruce D. Hartsell	■ IND	California State University.	\$20.00	\$240.00		

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
9/14/2017	Bruce D. Hartsell Bakersfield, CA 93311	IND COM OTH PTY SCC	California State University, Bakersfield Faculty Member	\$20.00	\$240.00	
10/9/2017	Bruce D. Hartsell Bakersfield, CA 93311	IND COM OTH PTY SCC	California State University, Bakersfield Faculty Member	\$20.00	\$240.00	
12/4/2017	Bruce D. Hartsell Bakersfield, CA 93311	IND COM OTH PTY SCC	California State University, Bakersfield Faculty Member	\$20.00	\$240.00	
12/18/2017	Bruce D. Hartsell Bakersfield, CA 93311	IND COM OTH PTY SCC	California State University, Bakersfield Faculty Member	\$20.00	\$240.00	
7/31/2017	Vickie L. Harvey Turlock, CA 95382	IND COM OTH PTY SCC	California State University, Stanislaus Faculty Member	\$15.00	\$180.00	

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*Contributor Codes

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OTH - Other

PTY - Political Party

Type or print in ink.
Amounts may be rounded

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Monetary Contributions Received			whole dollars.	Statement cov	CALIFORNIA 460			
SEE INSTRUCTION	IS ON REVERSE			through12/31/201	7	Page	of	142
NAME OF FILER						I.D. N	lumber	
Faculty for Our Uni	versity's Future, Local Committee, sponsored by the California Faculty	Association				12337	22	
	EUL MANE MANUNIO ARRESO		IE AN INDIVIDUAL ENTER	AMOUNT	CUMULATIVE TO	DATE	DED EI E	ECTION

Size Size	DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
Turlock, CA 95382	8/28/2017	Vickie L. Harvey Turlock, CA 95382	☐ COM ☐ OTH ☐ PTY	Stanislaus	\$15.00	\$180.00	
Turlock, CA 95382 COM OTH	9/14/2017	Vickie L. Harvey Turlock, CA 95382	☐ COM ☐ OTH ☐ PTY	Stanislaus	\$15.00	\$180.00	
Turlock, CA 95382 COM OTH PTY SCC 12/18/2017 Vickie L. Harvey Turlock, CA 95382 Turlock, CA 95382 COM OTH PTY SCC SCC IND California State University, Stanislaus Faculty Member Stanislaus Faculty Member \$15.00 \$180.00	10/9/2017		☐ COM ☐ OTH ☐ PTY	Stanislaus	\$15.00	\$180.00	
Turlock, CA 95382 COM OTH PTY Stanislaus Faculty Member	12/4/2017	Vickie L. Harvey Turlock, CA 95382	☐ COM ☐ OTH ☐ PTY	Stanislaus	\$15.00	\$180.00	
	12/18/2017		☐ COM ☐ OTH ☐ PTY	Stanislaus	\$15.00	\$180.00	

SUBTOTAL

*Contributor Codes

IND - Individual

COM - Recipient Committee (other than PTY or SCC)

OTH - Other

PTY - Political Party

SCC - Small Contributor Committee

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Amounts may be rounded to whole dollars.

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Statement covers period

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SEE INSTRUCTION	DNS ON REVERSE			through	7	Page	_55 of _142
NAME OF FILER Faculty for Our U	Iniversity's Future, Local Committee, sponsored by the California Fa	culty Association				I.D. N 12337	lumber 22
DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO CALENDAR YI (JAN. 1 - DEC.	EAR	PER ELECTION TO DATE (IF REQUIRED)
7/31/2017	Nichelle M. Henderson Los Angeles, CA 90032	IND COM OTH PTY SCC	California State University, Los Angeles Faculty Member	\$50.00	\$600.00		
8/28/2017	Nichelle M. Henderson Los Angeles, CA 90032	IND COM OTH PTY SCC	California State University, Los Angeles Faculty Member	\$50.00	\$600.00		
9/14/2017	Nichelle M. Henderson Los Angeles, CA 90032	IND COM OTH PTY SCC	California State University, Los Angeles Faculty Member	\$50.00	\$600.00		
10/9/2017	Nichelle M. Henderson Los Angeles, CA 90032	IND COM OTH PTY	California State University, Los Angeles Faculty Member	\$50.00	\$600.00		

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\$50.00

\$600.00

California State University, Los Angeles Faculty Member

*Contributor Codes

IND - Individual

COM - Recipient Committee (other than PTY or SCC)

Nichelle M. Henderson

Los Angeles, CA 90032

OTH - Other

12/4/2017

PTY - Political Party

SCC - Small Contributor Committee

Type or print in ink.
Amounts may be rounded

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Monetary Contributions Received			whole dollars.	from07/01/2017			CALIFORNIA 460		
SEE INSTRUCTION	IS ON REVERSE			through12/31/201	7	Page	_56 of _142		
NAME OF FILER						I.D. N	lumber		
Faculty for Our Uni	versity's Future, Local Committee, sponsored by the California Faculty	Association				12337	222		
DATE	FULL NAME, MAILING ADDRESS	CONTRIBUTOR	IF AN INDIVIDUAL, ENTER	AMOUNT	CUMULATIVE TO	O DATE	PER ELECTION		

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
12/18/2017	Nichelle M. Henderson Los Angeles, CA 90032	IND COM OTH PTY SCC	California State University, Los Angeles Faculty Member	\$50.00	\$600.00	
10/9/2017	Patricia Evridge Hill San Jose, CA 95192	IND COM OTH PTY SCC	San Jose State University Faculty Member	\$25.00	\$150.00	
12/4/2017	Patricia Evridge Hill San Jose, CA 95192	IND COM OTH PTY SCC	San Jose State University Faculty Member	\$25.00	\$150.00	
12/18/2017	Patricia Evridge Hill San Jose, CA 95192	IND COM OTH PTY SCC	San Jose State University Faculty Member	\$25.00	\$150.00	
7/31/2017	Gary J. Hytrek Long Beach, CA 90804	IND COM OTH PTY SCC	California State University, Long Beach Faculty Member	\$15.00	\$180.00	

*Contributor Codes

IND - Individual

COM - Recipient Committee (other than PTY or SCC)

OTH - Other

PTY - Political Party

SCC - Small Contributor Committee

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Amounts may be rounded

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Monetary Contributions Received			whole dollars.	Statement covers period from 07/01/2017			FORM 460
SEE INSTRUCTIOI	NS ON REVERSE			through12/31/2017	7	Page	
NAME OF FILER Faculty for Our Un	niversity's Future, Local Committee, sponsored by the California Faculty	Association				I.D. N 12337	lumber 122
DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO CALENDAR YE (JAN. 1 - DEC.	EAR	PER ELECTION TO DATE (IF REQUIRED)
8/28/2017	Gary I Hytrek	IND	California State University Long	\$15.00	\$180.00		

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
8/28/2017	Gary J. Hytrek Long Beach, CA 90804	IND COM OTH PTY SCC	California State University, Long Beach Faculty Member	\$15.00	\$180.00	
9/14/2017	Gary J. Hytrek Long Beach, CA 90804	IND COM OTH PTY SCC	California State University, Long Beach Faculty Member	\$15.00	\$180.00	
10/9/2017	Gary J. Hytrek Long Beach, CA 90804	IND COM OTH PTY SCC	California State University, Long Beach Faculty Member	\$15.00	\$180.00	
12/4/2017	Gary J. Hytrek Long Beach, CA 90804	IND COM OTH PTY SCC	California State University, Long Beach Faculty Member	\$15.00	\$180.00	
12/18/2017	Gary J. Hytrek Long Beach, CA 90804	IND COM OTH PTY SCC	California State University, Long Beach Faculty Member	\$15.00	\$180.00	

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*Contributor Codes

IND - Individual

COM - Recipient Committee (other than PTY or SCC)

OTH - Other

PTY - Political Party

Schedule A (Continuation Sheet)

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Monetary Contributions Received		to whole dollars.		Statement cover from 07/01/2017	•	CALIFORNIA 460 FORM		
SEE INSTRUCTION	NS ON REVERSE			through12/31/2017	7	Page	of142	
NAME OF FILER Faculty for Our Un	iversity's Future, Local Committee, sponsored by the California Faculty	Association				I.D. N 12337		
DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO CALENDAR YE (JAN. 1 - DEC.	EAR	PER ELECTION TO DATE (IF REQUIRED)	
7/31/2017	Kelly S. Janousek Long Beach, CA 90804	IND COM	California State Uiversity, Long Beach Faculty Member	\$50.00	\$600.00			

12/4/2017 Kelly S. Ja		☐ PTY ☐ SCC				
10/9/2017 Kelly S. Ja Long Bead	anousek ch, CA 90804	■ IND □ COM □ OTH	California State Uiversity, Long Beach Faculty Member	\$50.00	\$600.00	
	anousek ch, CA 90804	■ IND □ COM □ OTH □ PTY □ SCC	California State Uiversity, Long Beach Faculty Member	\$50.00	\$600.00	
9/14/2017 Kelly S. Ja Long Bead	anousek ch, CA 90804	■ IND □ COM □ OTH □ PTY □ SCC	California State Uiversity, Long Beach Faculty Member	\$50.00	\$600.00	
8/28/2017 Kelly S. Ja Long Bead	anousek ch, CA 90804	IND COM OTH PTY SCC	California State Uiversity, Long Beach Faculty Member	\$50.00	\$600.00	
7/31/2017 Kelly S. Ja Long Bead	anousek ch, CA 90804	■ IND □ COM □ OTH □ PTY □ SCC	California State Uiversity, Long Beach Faculty Member	\$50.00	\$600.00	

SUBTOTAL

*Contributor Codes

IND - Individual

COM - Recipient Committee (other than PTY or SCC)

OTH - Other

PTY - Political Party

SCC - Small Contributor Committee

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Amounts may be rounded

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Monetary Contributions Received		whole dollars.	Star	07/01/2017	•	CAL F	IFORNIA ORM	460
SEE INSTRUCTIONS ON REVERSE			through	12/31/2017	7	Page	59	of_142
NAME OF FILER faculty for Our University's Future, Local Committee, sponsored by the California Fac	culty Association					I.D. N 12337	lumber 22	

FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
Kelly S. Janousek Long Beach, CA 90804	IND COM OTH PTY SCC	California State Uiversity, Long Beach Faculty Member	\$50.00	\$600.00	
Marlyn J. Jones Sacramento, CA 95819	IND COM OTH PTY SCC	Sacramento State University Faculty Member	\$25.00	\$275.00	
Marlyn J. Jones Sacramento, CA 95819	IND COM OTH PTY SCC	Sacramento State University Faculty Member	\$25.00	\$275.00	
Marlyn J. Jones Sacramento, CA 95819	IND COM OTH PTY SCC	Sacramento State University Faculty Member	\$25.00	\$275.00	
Marlyn J. Jones Sacramento, CA 95819	IND COM OTH PTY SCC	Sacramento State University Faculty Member	\$25.00	\$275.00	
	AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER) Kelly S. Janousek Long Beach, CA 90804 Marlyn J. Jones Sacramento, CA 95819 Marlyn J. Jones Sacramento, CA 95819 Marlyn J. Jones Sacramento, CA 95819	AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER) Kelly S. Janousek Long Beach, CA 90804 IND COM OTH PTY SCC Marlyn J. Jones Sacramento, CA 95819 Marlyn J. Jones Sacramento, CA 95819 IND COM OTH PTY SCC Marlyn J. Jones Sacramento, CA 95819 IND COM OTH PTY SCC Marlyn J. Jones Sacramento, CA 95819 IND COM OTH PTY SCC Marlyn J. Jones Sacramento, CA 95819 IND COM OTH PTY SCC Marlyn J. Jones Sacramento, CA 95819 IND COM OTH PTY SCC	AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER) Kelly S. Janousek Long Beach, CA 90804 Marlyn J. Jones Sacramento, CA 95819 Marlyn J. Jones Sacramento, CA 95819	AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER) Kelly S. Janousek Long Beach, CA 90804 Marlyn J. Jones Sacramento, CA 95819 Marlyn J. Jones Sacramento, CA 95819	CONTRIBUTOR (IF CODMITTEE, ALSO ENTER I.D. NUMBER) Kelly S. Janousek Long Beach, CA 90804 Marlyn J. Jones Sacramento, CA 95819 Marlyn J. Jones Sacramento, CA 95819

SUBTOTAL	L
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*Contributor Codes

IND - Individual

COM - Recipient Committee (other than PTY or SCC)

OTH - Other

PTY - Political Party

Parvinder Kang Sacramento, CA 95814

Parvinder Kang Sacramento, CA 95814 Type or print in ink.
Amounts may be rounded

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Monetary Contributions Received		to	to whole dollars.		Statement covers period		CALIFORNIA 460	
SEE INSTRUCTIO	NS ON REVERSE			through 12/31/2017	7	Page ₋	60 of 142	
NAME OF FILER Faculty for Our Ur	niversity's Future, Local Committee, sponsored by the California Faculty	Association				I.D. Nu 123372		
DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO CALENDAR YE (JAN. 1 - DEC.	EAR	PER ELECTION TO DATE (IF REQUIRED)	
12/18/2017	Marlyn J. Jones Sacramento, CA 95819	IND COM OTH PTY SCC	Sacramento State University Faculty Member	\$25.00	\$275.00			
7/31/2017	Parvinder Kang Sacramento, CA 95814	IND COM OTH PTY SCC	California Faculty Association Staff Member	\$25.00	\$200.00			
8/28/2017	Parvinder Kang Sacramento, CA 95814	IND COM	California Faculty Association Staff Member	\$25.00	\$200.00			

California Faculty Association Staff Member

California Faculty Association Staff Member \$25.00

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*Contributor Codes

IND - Individual

9/14/2017

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COM - Recipient Committee (other than PTY or SCC)

OTH - Other

PTY - Political Party

SCC - Small Contributor Committee

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Amounts may be rounded

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Monetary (Contributions Received	to whole dollars.			Statement covers period from 07/01/2017			CALIFORNIA 46	
SEE INSTRUCTION	NS ON REVERSE			through_	12/31/2017	1	Page .	61 of	<u>f</u> 142
NAME OF FILER Faculty for Our Uni	iversity's Future, Local Committee, sponsored by the California Faculty	Association					I.D. No 123372		
	ELILI NAME MAILING ADDRESS		IF AN INDIVIDUAL ENTER	AMOL	JNT	CUMULATIVE TO	DATE	PER FI	ECTION

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
12/4/2017	Parvinder Kang Sacramento, CA 95814	IND COM OTH PTY SCC	California Faculty Association Staff Member	\$25.00	\$200.00	
12/18/2017	Parvinder Kang Sacramento, CA 95814	IND COM OTH PTY SCC	California Faculty Association Staff Member	\$25.00	\$200.00	
7/31/2017	Jonathan P. Karpf San Jose, CA 95192	IND COM OTH PTY SCC	San Jose State University Faculty Member	\$60.00	\$720.00	
8/28/2017	Jonathan P. Karpf San Jose, CA 95192	IND COM OTH PTY SCC	San Jose State University Faculty Member	\$60.00	\$720.00	
9/14/2017	Jonathan P. Karpf San Jose, CA 95192	IND COM OTH PTY SCC	San Jose State University Faculty Member	\$60.00	\$720.00	

SUBTOTAL

*Contributor Codes

IND - Individual

COM - Recipient Committee (other than PTY or SCC)

OTH - Other

PTY - Political Party

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Amounts may be rounded

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SEE INSTRUCTIO	ONS ON REVERSE			through 12/31/201	7	Page	_62 of 142	
NAME OF FILER Faculty for Our U	niversity's Future, Local Committee, sponsored by the California Fac	ulty Association				I.D. N 12337	umber 22	
DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO CALENDAR Y (JAN. 1 - DEC.	EAR	PER ELECTION TO DATE (IF REQUIRED)	
10/9/2017	Jonathan P. Karpf San Jose, CA 95192	■ IND □ COM □ OTH □ PTY □ SCC	San Jose State University Faculty Member	\$60.00	\$720.00			
12/4/2017	Jonathan P. Karpf San Jose, CA 95192	IND COM OTH PTY SCC	San Jose State University Faculty Member	\$60.00	\$720.00			
12/18/2017	Jonathan P. Karpf San Jose, CA 95192	IND COM OTH PTY SCC	San Jose State University Faculty Member	\$60.00	\$720.00			
7/31/2017	Carole L. Kennedy San Diego, CA 92182	IND COM OTH PTY	San Diego State University Faculty Member	\$25.00	\$300.00			

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\$25.00

\$300.00

San Diego State University Faculty Member

*Contributor Codes

IND - Individual

8/28/2017

COM - Recipient Committee (other than PTY or SCC)

Carole L. Kennedy San Diego, CA 92182

OTH - Other

PTY - Political Party

SCC - Small Contributor Committee

Type or print in ink.
Amounts may be rounded

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Monetary Contributions Received			whole dollars.	Statement cover from 07/01/2011	•	CALI F	FORNIA 460
SEE INSTRUCTION	IS ON REVERSE			through	7	Page .	63 of 142
NAME OF FILER Faculty for Our Uni	iversity's Future, Local Committee, sponsored by the California Facult	y Association				I.D. No 123372	
	FULL NAME. MAILING ADDRESS		IF AN INDIVIDUAL, ENTER	AMOUNT	CUMULATIVE TO	DATE	PER ELECTION

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
9/14/2017	Carole L. Kennedy San Diego, CA 92182	IND COM OTH PTY SCC	San Diego State University Faculty Member	\$25.00	\$300.00	
10/9/2017	Carole L. Kennedy San Diego, CA 92182	IND COM OTH PTY SCC	San Diego State University Faculty Member	\$25.00	\$300.00	
12/4/2017	Carole L. Kennedy San Diego, CA 92182	IND COM OTH PTY SCC	San Diego State University Faculty Member	\$25.00	\$300.00	
12/18/2017	Carole L. Kennedy San Diego, CA 92182	IND COM OTH PTY SCC	San Diego State University Faculty Member	\$25.00	\$300.00	
7/31/2017	Eddie Kirby Sacramento, CA 95814	IND COM OTH PTY SCC	California Faculty Association Staff Member	\$25.00	\$300.00	

SUBTOTAL

*Contributor Codes

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COM - Recipient Committee (other than PTY or SCC)

OTH - Other

PTY - Political Party

SCC - Small Contributor Committee

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Amounts may be rounded

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Monetary Contributions Received			whole dollars.	Statement cov. 67/01/201	•	CALIFORNIA 460	
SEE INSTRUCTION	NS ON REVERSE			through12/31/201	7	Page	_64 of _142
NAME OF FILER Faculty for Our Un	iversity's Future, Local Committee, sponsored by the California Faculty	Association				I.D. N 12337	lumber 22
DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO CALENDAR YE (JAN. 1 - DEC.	EAR	PER ELECTION TO DATE (IF REQUIRED)
8/28/2017	Eddie Kirby	IND	California Faculty Association	\$25.00	\$300.00		

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
8/28/2017	Eddie Kirby Sacramento, CA 95814	IND COM OTH PTY SCC	California Faculty Association Staff Member	\$25.00	\$300.00	
9/14/2017	Eddie Kirby Sacramento, CA 95814	IND COM OTH PTY SCC	California Faculty Association Staff Member	\$25.00	\$300.00	
10/9/2017	Eddie Kirby Sacramento, CA 95814	IND COM OTH PTY SCC	California Faculty Association Staff Member	\$25.00	\$300.00	
12/4/2017	Eddie Kirby Sacramento, CA 95814	IND COM OTH PTY SCC	California Faculty Association Staff Member	\$25.00	\$300.00	
12/18/2017	Eddie Kirby Sacramento, CA 95814	IND COM OTH PTY SCC	California Faculty Association Staff Member	\$25.00	\$300.00	

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*Contributor Codes

IND - Individual

COM - Recipient Committee (other than PTY or SCC)

OTH - Other

PTY - Political Party

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Monetary	onetary Contributions Received to whole dollars.		•			LIFORNIA 460 FORM	
SEE INSTRUCTION	DNS ON REVERSE			through	7	Page	65 of 142
NAME OF FILER Faculty for Our U	'niversity's Future, Local Committee, sponsored by the California Fac	culty Association				I.D. N 12337	umber 22
DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO CALENDAR Y (JAN. 1 - DEC.	EAR	PER ELECTION TO DATE (IF REQUIRED)
7/31/2017	Andrew L. Knighton Los Angeles, CA 90032	IND COM OTH PTY SCC	California State University, Los Angeles Faculty Member	\$15.00	\$180.00		
8/28/2017	Andrew L. Knighton Los Angeles, CA 90032	IND COM OTH PTY	California State University, Los Angeles Faculty Member	\$15.00	\$180.00		
9/14/2017	Andrew L. Knighton Los Angeles, CA 90032	IND COM OTH PTY	California State University, Los Angeles Faculty Member	\$15.00	\$180.00		
10/9/2017	Andrew L. Knighton Los Angeles, CA 90032	IND COM OTH PTY SCC	California State University, Los Angeles Faculty Member	\$15.00	\$180.00		
12/4/2017	Andrew L. Knighton Los Angeles, CA 90032	IND COM	California State University, Los Angeles	\$15.00	\$180.00		

Angeles Faculty Member

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SUBTOTAL

*Contributor Codes

IND - Individual

COM - Recipient Committee (other than PTY or SCC)

OTH - Other

PTY - Political Party

SCC - Small Contributor Committee

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Amounts may be rounded

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Monetary Contributions Received			whole dollars.	from 07/01/201	•	CALIFORNIA 460		
SEE INSTRUCTIONS O	N REVERSE			through	7	Page .	66 of 142	
NAME OF FILER Faculty for Our Univers	ity's Future, Local Committee, sponsored by the California Facult	y Association				I.D. Nu 123372		
DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SEI F.EMPLOYED, ENTER NAME)	AMOUNT RECEIVED THIS	CUMULATIVE TO	EAR	PER ELECTION TO DATE	

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
12/18/2017	Andrew L. Knighton Los Angeles, CA 90032	IND COM OTH PTY SCC	California State University, Los Angeles Faculty Member	\$15.00	\$180.00	
7/31/2017	Judith Kurylak Sacramento, CA 95814	IND COM OTH PTY SCC	California Faculty Association Staff Member	\$20.00	\$140.00	
7/31/2017	Beka Langen Sacramento, CA 95814	IND COM OTH PTY SCC	California Faculty Association Staff Member	\$25.00	\$300.00	
8/28/2017	Beka Langen Sacramento, CA 95814	IND COM OTH PTY SCC	California Faculty Association Staff Member	\$25.00	\$300.00	
9/14/2017	Beka Langen Sacramento, CA 95814	IND COM OTH PTY SCC	California Faculty Association Staff Member	\$25.00	\$300.00	

SUBTOTAL

*Contributor Codes

IND - Individual

COM - Recipient Committee (other than PTY or SCC)

OTH - Other

PTY - Political Party

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Amounts may be rounded

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Monetary Contributions Received		whole dollars.	State from	07/01/2017		CALII FO	FORNIA ORM	460)
EE INSTRUCTIONS ON REVERSE			through_	12/31/2017	,	Page _	67	of_142	
IAME OF FILER aculty for Our University's Future, Local Committee, sponsored by the California	Faculty Association					I.D. Nu 123372			
									_

FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
Beka Langen Sacramento, CA 95814	IND COM OTH PTY SCC	California Faculty Association Staff Member	\$25.00	\$300.00	
Beka Langen Sacramento, CA 95814	IND COM OTH PTY SCC	California Faculty Association Staff Member	\$25.00	\$300.00	
Beka Langen Sacramento, CA 95814	IND COM OTH PTY SCC	California Faculty Association Staff Member	\$25.00	\$300.00	
Unna I. Lassiter Long Beach, CA 90804	IND COM OTH PTY SCC	California State Univeristy, Long Beach Faculty Member	\$25.00	\$300.00	
Unna I. Lassiter Long Beach, CA 90804	IND COM OTH PTY SCC	California State Univeristy, Long Beach Faculty Member	\$25.00	\$300.00	
	AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER) Beka Langen Sacramento, CA 95814 Beka Langen Sacramento, CA 95814 Beka Langen Sacramento, CA 95814 Unna I. Lassiter Long Beach, CA 90804	AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER) Beka Langen Sacramento, CA 95814 Beka L	AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER) Beka Langen Sacramento, CA 95814 California Faculty Association Staff Member COM OTH PTY ScC Unna I. Lassiter Long Beach, CA 90804 Unna I. Lassiter Long Beach, CA 90804 California State Univeristy, Long Beach Faculty Member California Faculty Member	AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER) Beka Langen Sacramento, CA 95814 Bind COM OTH PTY SCC Unna I. Lassiter Long Beach, CA 90804 Bekach Faculty Member Scoc California State Univeristy, Long Beach Faculty Member \$25.00 \$25.00 \$25.00	CONTRIBUTOR (FCOMMITTEE, ALSO ENTER ID, NUMBER) Beka Langen Sacramento, CA 95814 Beka Langen Sacramento, CA 95814 Beka Langen Sacramento, CA 95814 COM OTH PTY SCC Beka Langen Sacramento, CA 95814 COM OTH PTY SCC Beka Langen Sacramento, CA 95814 COM OTH PTY SCC Beka Langen Sacramento, CA 95814 COM OTH PTY SCC Beka Langen Sacramento, CA 95814 COM OTH PTY SCC Beka Langen Sacramento, CA 95814 COM OTH PTY SCC Beka Langen Sacramento, CA 95814 COM OTH PTY SCC Beka Langen Sacramento, CA 95814 Com OTH PTY SCC Beka Langen Sacramento, CA 95814 Com OTH PTY SCC Beka Langen Sacramento, CA 95814 Com OTH PTY SCC Beka Langen Sacramento, CA 95814 Com OTH PTY SCC Beka Langen Sacramento, CA 95814 Com OTH PTY SCC Beka Langen Sacramento, CA 95814 Com OTH PTY SCC California State Univeristy, Long Beach Paculty Member Sacoulty Member Sacoulty Member Sacoulty Member Sacoulty Member

SUBTOTAL

*Contributor Codes

IND - Individual

COM - Recipient Committee (other than PTY or SCC)

OTH - Other

PTY - Political Party

SCC - Small Contributor Committee

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Amounts may be rounded to whole dollars.

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Statement covers period

•				from07/01/201	7	F	ORM 400
SEE INSTRUCTION	DNS ON REVERSE			through	7	Page	_68of_142
NAME OF FILER Faculty for Our U	University's Future, Local Committee, sponsored by the California Fa	aculty Association				I.D. N 12337	lumber 22
DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO CALENDAR Y (JAN. 1 - DEC	EAR	PER ELECTION TO DATE (IF REQUIRED)
9/14/2017	Unna I. Lassiter Long Beach, CA 90804	■ IND □ COM □ OTH □ PTY □ SCC	California State Univeristy, Long Beach Faculty Member	\$25.00	\$300.00		
10/9/2017	Unna I. Lassiter Long Beach, CA 90804	■ IND □ COM □ OTH □ PTY □ SCC	California State Univeristy, Long Beach Faculty Member	\$25.00	\$300.00		
12/4/2017	Unna I. Lassiter Long Beach, CA 90804	IND COM OTH PTY SCC	California State Univeristy, Long Beach Faculty Member	\$25.00	\$300.00		
12/18/2017	Unna I. Lassiter Long Beach, CA 90804	IND COM OTH PTY SCC	California State Univeristy, Long Beach Faculty Member	\$25.00	\$300.00		

Cal Poly, Pomona Faculty Member

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\$15.00

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*Contributor Codes

IND - Individual

7/31/2017

COM - Recipient Committee (other than PTY or SCC)

John P. Lloyd Pomona, CA 91768

OTH - Other

PTY - Political Party

SCC - Small Contributor Committee

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Amounts may be rounded to whole dollars.

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CALIFORNIA ACO

Statement covers period

,				from07/01/201	7	F	ORM 400
SEE INSTRUCTIO	ONS ON REVERSE			through	7	Page	69 of 142
NAME OF FILER Faculty for Our U	niversity's Future, Local Committee, sponsored by the California Fac	culty Association				I.D. N 12337	
DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO CALENDAR YE (JAN. 1 - DEC.	EAR	PER ELECTION TO DATE (IF REQUIRED)
8/28/2017	John P. Lloyd Pomona, CA 91768	IND COM OTH PTY SCC	Cal Poly, Pomona Faculty Member	\$15.00	\$180.00		
9/14/2017	John P. Lloyd Pomona, CA 91768	IND COM OTH PTY SCC	Cal Poly, Pomona Faculty Member	\$15.00	\$180.00		
10/9/2017	John P. Lloyd Pomona, CA 91768	IND COM OTH PTY SCC	Cal Poly, Pomona Faculty Member	\$15.00	\$180.00		
12/4/2017	John P. Lloyd Pomona, CA 91768	IND COM OTH PTY SCC	Cal Poly, Pomona Faculty Member	\$15.00	\$180.00		
12/18/2017	John P. Lloyd Pomona, CA 91768	IND COM	Cal Poly, Pomona Faculty Member	\$15.00	\$180.00	·	

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*Contributor Codes

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COM - Recipient Committee (other than PTY or SCC)

OTH - Other

PTY - Political Party

SCC - Small Contributor Committee

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Amounts may be rounded

SCHEDULE A (CONT.)

Statement covers period

monetary contributions received		το	o whole dollars.	from07/01/202	17	FORM 46U		
SEE INSTRUCTION	DNS ON REVERSE			through12/31/202	17	Page	of142	
NAME OF FILER Faculty for Our U	University's Future, Local Committee, sponsored by the California Fa	culty Association				I.D. N 12337	lumber 222	
DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO CALENDAR Y (JAN. 1 - DEC	EAR	PER ELECTION TO DATE (IF REQUIRED)	
7/31/2017	Maureen Loughran San Diego, CA 92109	IND COM OTH PTY SCC	California Faculty Association Staff Member	\$25.00	\$300.00			
8/28/2017	Maureen Loughran San Diego, CA 92109	IND COM OTH PTY SCC	California Faculty Association Staff Member	\$25.00	\$300.00			
9/14/2017	Maureen Loughran San Diego, CA 92109	IND COM OTH PTY SCC	California Faculty Association Staff Member	\$25.00	\$300.00			
10/9/2017	Maureen Loughran San Diego, CA 92109	IND COM	California Faculty Association Staff Member	\$25.00	\$300.00			

California Faculty Association Staff Member

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\$25.00

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*Contributor Codes

IND - Individual

12/4/2017

COM - Recipient Committee (other than PTY or SCC)

Maureen Loughran San Diego, CA 92109

OTH - Other

PTY - Political Party

SCC - Small Contributor Committee

Type or print in ink.
Amounts may be rounded

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monetary contributions reconved		τα	o whole dollars.	from07/01/201	7	FORM 40U		
SEE INSTRUCTIO	ONS ON REVERSE			through	7	Page	of	
NAME OF FILER Faculty for Our U	niversity's Future, Local Committee, sponsored by the California Facu	ulty Association				I.D. N 12337	umber 22	
DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO CALENDAR Y (JAN. 1 - DEC.	EAR	PER ELECTION TO DATE (IF REQUIRED)	
12/18/2017	Maureen Loughran San Diego, CA 92109	IND COM OTH PTY SCC	California Faculty Association Staff Member	\$25.00	\$300.00			
7/31/2017	Jarret S. Lovell Fullerton, CA 92831	IND COM OTH PTY SCC	California State University, Fullerton Faculty Member	\$25.00	\$300.00			
8/28/2017	Jarret S. Lovell Fullerton, CA 92831	IND COM OTH PTY SCC	California State University, Fullerton Faculty Member	\$25.00	\$300.00			
9/14/2017	Jarret S. Lovell Fullerton, CA 92831	IND COM OTH PTY	California State University, Fullerton Faculty Member	\$25.00	\$300.00			

California State University, Fullerton Faculty Member

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SUBTOTAL	
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\$25.00

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Statement covers period

*Contributor Codes

IND - Individual

10/9/2017

COM - Recipient Committee (other than PTY or SCC)

OTH - Other

PTY - Political Party

SCC - Small Contributor Committee

Jarret S. Lovell

Fullerton, CA 92831

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Amounts may be rounded

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Monetary Contributions Received		to whole dollars.	from_	07/01/2017	•	CAL F	CALIFORNIA 46(
SEE INSTRUCTION	S ON REVERSE		throug	h_12/31/2017	7	_ Page	. <u>72</u> o	of_142	
NAME OF FILER Faculty for Our Univ	iversity's Future, Local Committee, sponsored by the California Faculty A	Association				I.D. No 123372	Number 722		
	ELILL NAME MAILING ADDRESS	IF AN INDIVIDUAL ENTER	AM	IOLINT	CUMULATIVE T	O DATE	PER FI	ECTION	

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
12/4/2017	Jarret S. Lovell Fullerton, CA 92831	IND COM OTH PTY SCC	California State University, Fullerton Faculty Member	\$25.00	\$300.00	
12/18/2017	Jarret S. Lovell Fullerton, CA 92831	IND COM OTH PTY SCC	California State University, Fullerton Faculty Member	\$25.00	\$300.00	
7/31/2017	John D. Lovell Hayward, CA 94542	IND COM OTH PTY SCC	California State University, East Bay Faculty Member	\$25.00	\$300.00	
8/28/2017	John D. Lovell Hayward, CA 94542	IND COM OTH PTY SCC	California State University, East Bay Faculty Member	\$25.00	\$300.00	
9/14/2017	John D. Lovell Hayward, CA 94542	IND COM OTH PTY SCC	California State University, East Bay Faculty Member	\$25.00	\$300.00	

SUBTOTAL

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Amounts may be rounded

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Monetary (Contributions Received		whole dollars.	from	from 07/01/2017			california 46(
SEE INSTRUCTION	IS ON REVERSE			through	1 <u>2/31/2017</u>	7	Page	73 of 1	142	
NAME OF FILER Faculty for Our Univ	iversity's Future, Local Committee, sponsored by the California Faculty	Association					I.D. No 123372			
	ELILL NAME MAILING ADDRESS		IF AN INDIVIDUAL. ENTER	AMO	DUNT	CUMULATIVE T	O DATE	PER ELEC	CTION	

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
10/9/2017	John D. Lovell Hayward, CA 94542	IND COM OTH PTY SCC	California State University, East Bay Faculty Member	\$25.00	\$300.00	
12/4/2017	John D. Lovell Hayward, CA 94542	IND COM OTH PTY SCC	California State University, East Bay Faculty Member	\$25.00	\$300.00	
12/18/2017	John D. Lovell Hayward, CA 94542	IND COM OTH PTY SCC	California State University, East Bay Faculty Member	\$25.00	\$300.00	
7/31/2017	Benedicta B. Lusk Fullerton, CA 92831	IND COM OTH PTY SCC	California State University, Fullerton Faculty Member	\$15.00	\$180.00	
8/28/2017	Benedicta B. Lusk Fullerton, CA 92831	IND COM OTH PTY SCC	California State University, Fullerton Faculty Member	\$15.00	\$180.00	

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*Contributor Codes

IND - Individual

COM - Recipient Committee (other than PTY or SCC)

OTH - Other

PTY - Political Party

SCC - Small Contributor Committee

Type or print in ink.
Amounts may be rounded

SCHEDULE A (CONT.)

Statement covers period

Wonetary	Contributions Neceived	to	o whole dollars.	from07/01/201			ORM 46U
SEE INSTRUCTIO	DNS ON REVERSE			through	17	Page .	74 of 142
NAME OF FILER Faculty for Our U	iniversity's Future, Local Committee, sponsored by the California Facu	lty Association				I.D. Nu 123372	
DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO I CALENDAR YEA (JAN. 1 - DEC. 3	AR	PER ELECTION TO DATE (IF REQUIRED)
9/14/2017	Benedicta B. Lusk Fullerton, CA 92831	IND COM OTH PTY SCC	California State University, Fullerton Faculty Member	\$15.00	\$180.00		
10/9/2017	Benedicta B. Lusk Fullerton, CA 92831	IND COM OTH PTY SCC	California State University, Fullerton Faculty Member	\$15.00	\$180.00		
12/4/2017	Benedicta B. Lusk Fullerton, CA 92831	IND COM OTH PTY SCC	California State University, Fullerton Faculty Member	\$15.00	\$180.00		
12/18/2017	Benedicta B. Lusk Fullerton, CA 92831	IND COM OTH PTY SCC	California State University, Fullerton Faculty Member	\$15.00	\$180.00		
7/31/2017	Neal A. Macdougall San Luis Obispo, CA 93407	■ IND □ COM □ OTH	California State University, San Luis Obispo Faculty Member	\$15.00	\$180.00		

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*Contributor Codes

IND - Individual

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OTH - Other

PTY - Political Party

SCC - Small Contributor Committee

Neal A. Macdougall San Luis Obispo, CA 93407

Neal A. Macdougall San Luis Obispo, CA 93407

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Monetary	Contributions Received		nts may be rounded whole dollars.	Statement cover from 07/01/2011	•	CALII F(FORNIA 460
SEE INSTRUCTIO	NS ON REVERSE			through12/31/2017	7	Page _	75 of 142
NAME OF FILER Faculty for Our Ur	niversity's Future, Local Committee, sponsored by the California Facu	ulty Association				I.D. Nu 123372	
DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO CALENDAR YI (JAN. 1 - DEC.	EAR	PER ELECTION TO DATE (IF REQUIRED)
8/28/2017	Neal A. Macdougall San Luis Obispo, CA 93407	IND COM OTH PTY SCC	California State University, San Luis Obispo Faculty Member	\$15.00	\$180.00		
9/14/2017	Neal A. Macdougall San Luis Obispo, CA 93407	IND COM OTH PTY SCC	California State University, San Luis Obispo Faculty Member	\$15.00	\$180.00		
10/9/2017	Neal A. Macdougall San Luis Obispo, CA 93407	IND COM OTH PTY	California State University, San Luis Obispo Faculty Member	\$15.00	\$180.00		

California State University, San Luis Obispo Faculty Member

California State University, San Luis Obispo Faculty Member

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\$180.00

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*Contributor Codes

IND - Individual

12/4/2017

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COM - Recipient Committee (other than PTY or SCC)

OTH - Other

PTY - Political Party

SCC - Small Contributor Committee

Type or print in ink.
Amounts may be rounded

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Monetary Contributions Received			whole dollars.	Statement coverage	CALIFORNIA 460			
SEE INSTRUCTION	IS ON REVERSE			through 12/31/201	7	Page	of	142
NAME OF FILER						I.D. N	umber	
Faculty for Our Uni	versity's Future, Local Committee, sponsored by the California Faculty	Association				123372	22	
	FILL MANE MANUNICADED		IE AN INDIVIDUAL ENTER	AMOUNT	CLIMITI ATIVE TO	DATE	DED ELE	CTION

DATE RECEIVED PULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR CODE* RECEIVED PURPLE AND ENTER LAS DENTER LD, NUMBER) FAN INDIVIDUAL, ENTER CELVED THIS PERIODS (ANA 1- DEC. 31) TO DATE CALENDAR YEAR (IF REQUIRED)							
Los Angeles, CA 90032		AND ZIP CODE OF CONTRIBUTOR		OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME	RECEIVED THIS	CALENDAR YEAR	TO DATE
Los Angeles, CA 90032 COM OTH PTY SCC SCC SCC SCC Sulty Member SCC SCC Sulty Member SCC Sulty Member Sulty Member	7/31/2017		☐ COM ☐ OTH ☐ PTY	Angeles	\$25.00	\$300.00	
Los Angeles, CA 90032 COM OTH PTY SCC 10/9/2017	8/28/2017		☐ COM ☐ OTH ☐ PTY	California State University, Los Angeles Faculty Member	\$25.00	\$300.00	
Los Angeles, CA 90032 COM OTH PTY SCC 12/4/2017 Alejandra E. Marchevsky Los Angeles, CA 90032 IND Colifornia State University, Los Angeles Faculty Member SCC OTH PTY SCC IND California State University, Los Angeles Faculty Member Scot Scot Scot Scot Scot Scot Scot Scot	9/14/2017		☐ COM ☐ OTH ☐ PTY	Angeles	\$25.00	\$300.00	
Los Angeles, CA 90032 COM Angeles Faculty Member PTY	10/9/2017	Alejandra E. Marchevsky Los Angeles, CA 90032	☐ COM ☐ OTH ☐ PTY	Angeles	\$25.00	\$300.00	
	12/4/2017	Alejandra E. Marchevsky Los Angeles, CA 90032	☐ COM ☐ OTH ☐ PTY	Angeles	\$25.00	\$300.00	

SUBTOTAL

*Contributor Codes

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COM - Recipient Committee (other than PTY or SCC)

OTH - Other

PTY - Political Party

SCC - Small Contributor Committee

Type or print in ink.
Amounts may be rounded

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Monetary (Contributions Received		whole dollars.	Statement cov	•	CALI F	IFORNIA ORM	460
SEE INSTRUCTION	IS ON REVERSE			through12/31/201	7	Page	<u>77</u> of	142
NAME OF FILER						I.D. N	umber	
Faculty for Our Uni	versity's Future, Local Committee, sponsored by the California Faculty	Association				12337	22	
	EUL MANE MANUNIO ARRESO		IE AN INDIVIDUAL ENTER	AMOUNT	CUMULATIVE TO	DATE	DED EI I	ECTION

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
12/18/2017	Alejandra E. Marchevsky Los Angeles, CA 90032	IND COM OTH PTY SCC	California State University, Los Angeles Faculty Member	\$25.00	\$300.00	
7/31/2017	Alison L. Mckee San Jose, CA 95192	IND COM OTH PTY SCC	San Jose State University Faculty Member	\$25.00	\$300.00	
8/28/2017	Alison L. Mckee San Jose, CA 95192	IND COM OTH PTY SCC	San Jose State University Faculty Member	\$25.00	\$300.00	
9/14/2017	Alison L. Mckee San Jose, CA 95192	IND COM OTH PTY SCC	San Jose State University Faculty Member	\$25.00	\$300.00	
10/9/2017	Alison L. Mckee San Jose, CA 95192	IND COM OTH PTY SCC	San Jose State University Faculty Member	\$25.00	\$300.00	

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*Contributor Codes

IND - Individual

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Amounts may be rounded

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Monetary	Contributions Received	to	whole dollars.	from <u>07/01/201</u>	•		orm 460
SEE INSTRUCTIO	ONS ON REVERSE			through12/31/202	17	Page	78 of 142
NAME OF FILER Faculty for Our U	niversity's Future, Local Committee, sponsored by the California Fac	culty Association				I.D. N 12337	umber 22
DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO CALENDAR YI (JAN. 1 - DEC.	EAR	PER ELECTION TO DATE (IF REQUIRED)
12/4/2017	Alison L. Mckee San Jose, CA 95192	IND COM OTH PTY SCC	San Jose State University Faculty Member	\$25.00	\$300.00		
12/18/2017	Alison L. Mckee San Jose, CA 95192	IND COM OTH PTY SCC	San Jose State University Faculty Member	\$25.00	\$300.00		
7/31/2017	Robin Anne Meiggs Arcata, CA 95521	IND COM OTH PTY SCC	Humboldt State University Faculty Member	\$25.00	\$300.00		
8/28/2017	Robin Anne Meiggs Arcata, CA 95521	IND COM OTH PTY	Humboldt State University Faculty Member	\$25.00	\$300.00		

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Humboldt State University Faculty Member

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9/14/2017

COM - Recipient Committee (other than PTY or SCC)

OTH - Other

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Robin Anne Meiggs Arcata, CA 95521

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Monetary	Contributions Received		o whole dollars.	Statement cov from 07/01/201	•	CALI F	FORNIA 460
SEE INSTRUCTIO	ONS ON REVERSE			through	7	Page .	79 of 142
NAME OF FILER Faculty for Our U	niversity's Future, Local Committee, sponsored by the California Fac	culty Association				I.D. Nu 123372	
DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO CALENDAR YE (JAN. 1 - DEC.	EAR	PER ELECTION TO DATE (IF REQUIRED)
10/9/2017	Robin Anne Meiggs Arcata, CA 95521	IND COM OTH PTY SCC	Humboldt State University Faculty Member	\$25.00	\$300.00		
12/4/2017	Robin Anne Meiggs Arcata, CA 95521	IND COM OTH PTY SCC	Humboldt State University Faculty Member	\$25.00	\$300.00		
12/18/2017	Robin Anne Meiggs Arcata, CA 95521	IND COM OTH PTY SCC	Humboldt State University Faculty Member	\$25.00	\$300.00		
7/31/2017	Theresa Montano Northridge, CA 91330	IND COM OTH PTY SCC	California State University, Northridge Faculty Member	\$50.00	\$600.00		
8/28/2017	Theresa Montano Northridge, CA 91330	IND COM	California State University, Northridge Faculty Member	\$50.00	\$600.00		

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SEE INSTRUCTION	ONS ON REVERSE			through	7	Page .	80 of 142
NAME OF FILER Faculty for Our U	University's Future, Local Committee, sponsored by the California Fac	ulty Association				I.D. No 123372	
DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO CALENDAR YE (JAN. 1 - DEC.	AR	PER ELECTION TO DATE (IF REQUIRED)
9/14/2017	Theresa Montano Northridge, CA 91330	IND COM OTH PTY SCC	California State University, Northridge Faculty Member	\$50.00	\$600.00		
10/9/2017	Theresa Montano Northridge, CA 91330	IND COM OTH PTY	California State University, Northridge Faculty Member	\$50.00	\$600.00		
12/4/2017	Theresa Montano Northridge, CA 91330	IND COM OTH PTY SCC	California State University, Northridge Faculty Member	\$50.00	\$600.00		
12/18/2017	Theresa Montano Northridge, CA 91330	IND COM OTH PTY SCC	California State University, Northridge Faculty Member	\$50.00	\$600.00		
7/31/2017	Jose F. Montes Northridge, CA 91330	IND COM	California State University, Northridge Faculty Member	\$25.00	\$275.00		

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SCC - Small Contributor Committee

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Monetary Contributions Received		whole dollars.	Stat	07/01/2017	•	CALI F	IFORNIA ORM	460	D
SEE INSTRUCTIONS ON REVERSE			through	12/31/2017	7	Page	81	of_142	_
NAME OF FILER Faculty for Our University's Future, Local Committee, sponsored by the California Faculty	Association					I.D. N 123372			

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
8/28/2017	Jose F. Montes Northridge, CA 91330	IND COM OTH PTY SCC	California State University, Northridge Faculty Member	\$25.00	\$275.00	
9/14/2017	Jose F. Montes Northridge, CA 91330	IND COM OTH PTY SCC	California State University, Northridge Faculty Member	\$25.00	\$275.00	
10/9/2017	Jose F. Montes Northridge, CA 91330	IND COM OTH PTY SCC	California State University, Northridge Faculty Member	\$25.00	\$275.00	
12/18/2017	Jose F. Montes Northridge, CA 91330	IND COM OTH PTY SCC	California State University, Northridge Faculty Member	\$25.00	\$275.00	
7/31/2017	Chris P. Nagel Turlock, CA 95382	IND COM OTH PTY SCC	California State University, Stanislaus Faculty Member	\$25.00	\$300.00	

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OTH - Other

PTY - Political Party

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Monetary Contributions Received			nts may be rounded whole dollars.	Statement covers period from 07/01/2017		CALIFORNIA 460		
	ONS ON REVERSE			through12/31/201	7	Page		
NAME OF FILER Faculty for Our U	niversity's Future, Local Committee, sponsored by the California Fac	culty Association				I.D. No 123372		
DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO CALENDAR Y (JAN. 1 - DEC	EAR	PER ELECTION TO DATE (IF REQUIRED)	
8/28/2017	Chris P. Nagel Turlock, CA 95382	IND COM OTH PTY SCC	California State University, Stanislaus Faculty Member	\$25.00	\$300.00			
9/14/2017	Chris P. Nagel Turlock, CA 95382	IND COM OTH PTY SCC	California State University, Stanislaus Faculty Member	\$25.00	\$300.00			
10/9/2017	Chris P. Nagel Turlock, CA 95382	IND COM OTH PTY SCC	California State University, Stanislaus Faculty Member	\$25.00	\$300.00			
12/4/2017	Chris P. Nagel Turlock, CA 95382	IND COM OTH PTY SCC	California State University, Stanislaus Faculty Member	\$25.00	\$300.00			

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California State University, Stanislaus Faculty Member

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12/18/2017

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OTH - Other

PTY - Political Party

SCC - Small Contributor Committee

Chris P. Nagel Turlock, CA 95382

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Monetary Contributions Received		butions Received to whole dollars. Statement covers peri from 07/01/2017		CALIFORNIA		IFORNIA 460	
	ONS ON REVERSE			through12/31/201	7	Page	
NAME OF FILER Faculty for Our Un	niversity's Future, Local Committee, sponsored by the California Fa	culty Association				I.D. No 123372	
DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO CALENDAR Y (JAN. 1 - DEC	EAR	PER ELECTION TO DATE (IF REQUIRED)
7/31/2017	Juliana Nascimento Sacramento, CA 95814	IND COM OTH PTY SCC	California Faculty Association Staff Member	\$15.00	\$180.00		
8/28/2017	Juliana Nascimento Sacramento, CA 95814	IND COM OTH PTY SCC	California Faculty Association Staff Member	\$15.00	\$180.00		
9/14/2017	Juliana Nascimento Sacramento, CA 95814	IND COM OTH PTY SCC	California Faculty Association Staff Member	\$15.00	\$180.00		
10/9/2017	Juliana Nascimento Sacramento, CA 95814	IND COM OTH PTY SCC	California Faculty Association Staff Member	\$15.00	\$180.00		

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\$15.00

\$180.00

California Faculty Association Staff Member

*Contributor Codes

IND - Individual

12/4/2017

COM - Recipient Committee (other than PTY or SCC)

Juliana Nascimento

Sacramento, CA 95814

OTH - Other

PTY - Political Party

SCC - Small Contributor Committee

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Amounts may be rounded

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Monetary Contributions Received			nts may be rounded whole dollars.	Statement covers period from 07/01/2017		CALIFORNIA 460	
	ONS ON REVERSE			through12/31/201	7	Page	84 of 142
NAME OF FILER Faculty for Our Un	niversity's Future, Local Committee, sponsored by the California Fac	culty Association				I.D. N 12337	umber 22
DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO CALENDAR YI (JAN. 1 - DEC.	EAR	PER ELECTION TO DATE (IF REQUIRED)
12/18/2017	Juliana Nascimento Sacramento, CA 95814	IND COM OTH PTY SCC	California Faculty Association Staff Member	\$15.00	\$180.00		
7/31/2017	Elaine T. Newman Rohnert Park, CA 94928	IND COM OTH PTY SCC	California State University, Sonoma Faculty Member	\$75.00	\$900.00		
8/28/2017	Elaine T. Newman Rohnert Park, CA 94928	IND COM OTH PTY SCC	California State University, Sonoma Faculty Member	\$75.00	\$900.00		
9/14/2017	Elaine T. Newman Rohnert Park, CA 94928	IND COM OTH PTY SCC	California State University, Sonoma Faculty Member	\$75.00	\$900.00		

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\$75.00

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California State University,

Sonoma Faculty Member

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10/9/2017

COM - Recipient Committee (other than PTY or SCC)

Elaine T. Newman

Rohnert Park, CA 94928

OTH - Other

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SCC - Small Contributor Committee

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Monetary Contributions Received			to whole dollars.		Statement covers period from 07/01/2017		CALIFORNIA 460	
	DNS ON REVERSE			through12/31/201	7	Page		
NAME OF FILER Faculty for Our U	Iniversity's Future, Local Committee, sponsored by the California Fa	culty Association				I.D. N 12337	umber 22	
DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO CALENDAR Y (JAN. 1 - DEC	EAR	PER ELECTION TO DATE (IF REQUIRED)	
12/4/2017	Elaine T. Newman Rohnert Park, CA 94928	IND COM OTH PTY SCC	California State University, Sonoma Faculty Member	\$75.00	\$900.00			
12/18/2017	Elaine T. Newman Rohnert Park, CA 94928	IND COM OTH PTY SCC	California State University, Sonoma Faculty Member	\$75.00	\$900.00			
7/31/2017	Leticia Ocana Los Angeles, CA 90032	IND COM OTH PTY SCC	California State University, Los Angeles Faculty Member	\$25.00	\$200.00			
8/28/2017	Leticia Ocana Los Angeles, CA 90032	IND COM OTH PTY SCC	California State University, Los Angeles Faculty Member	\$25.00	\$200.00			
7/31/2017	Meghan K. O'Donnell Seaside, CA 93955	IND COM	California State University, Monterey Bay Faculty Member	\$15.00	\$165.00			

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Amounts may be rounded

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Monetary Contributions Received		to	to whole dollars.		Statement covers period from 07/01/2017		CALIFORNIA 460	
SEE INSTRUCTIONS ON	N REVERSE			through	7	Page .	86 of 142	
NAME OF FILER Faculty for Our Universi	ty's Future, Local Committee, sponsored by the California Fac	ulty Association				I.D. Nu 123372		
DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER LD, NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO CALENDAR Y (JAN. 1 - DEC	EAR	PER ELECTION TO DATE (IF REQUIRED)	

AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
Meghan K. O'Donnell Seaside, CA 93955	IND COM OTH PTY SCC	California State University, Monterey Bay Faculty Member	\$15.00	\$165.00	
Meghan K. O'Donnell Seaside, CA 93955	IND COM OTH PTY SCC	California State University, Monterey Bay Faculty Member	\$15.00	\$165.00	
Meghan K. O'Donnell Seaside, CA 93955	IND COM OTH PTY SCC	California State University, Monterey Bay Faculty Member	\$15.00	\$165.00	
Meghan K. O'Donnell Seaside, CA 93955	IND COM OTH PTY SCC	California State University, Monterey Bay Faculty Member	\$15.00	\$165.00	
Roberta Orona-Cordova Northridge, CA 91330	IND COM OTH PTY SCC	California State University, Northridge Faculty Member	\$15.00	\$180.00	
MeSe MeSe Me	eghan K. O'Donnell eghan K. O'Donnell easide, CA 93955 eghan K. O'Donnell easide, CA 93955 eghan K. O'Donnell easide, CA 93955 eghan K. O'Donnell easide, CA 93955	eghan K. O'Donnell caside, CA 93955 COM	eghan K. O'Donnell aside, CA 93955 IND	eghan K. O'Donnell aside, CA 93955 SCC California State University, Monterey Bay Faculty Member SCC	eghan K. O'Donnell aside, CA 93955 IND California State University, Monterey Bay Faculty Member

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IND - Individual

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Amounts may be rounded

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Monetary Contributions Received		to	to whole dollars.		ers period	CALI F	CALIFORNIA 460	
SEE INSTRUCTIONS O	N REVERSE			through12/31/201	7	Page	_87 of _142	
NAME OF FILER Faculty for Our Univers	ity's Future, Local Committee, sponsored by the California F	aculty Association				I.D. N 123372	lumber 22	
DATE	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR	CONTRIBUTOR	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER	AMOUNT RECEIVED THIS	CUMULATIVE T	/EAR	PER ELECTION TO DATE	

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
8/28/2017	Roberta Orona-Cordova Northridge, CA 91330	IND COM OTH PTY SCC	California State University, Northridge Faculty Member	\$15.00	\$180.00	
9/14/2017	Roberta Orona-Cordova Northridge, CA 91330	IND COM OTH PTY SCC	California State University, Northridge Faculty Member	\$15.00	\$180.00	
10/9/2017	Roberta Orona-Cordova Northridge, CA 91330	IND COM OTH PTY SCC	California State University, Northridge Faculty Member	\$15.00	\$180.00	
12/4/2017	Roberta Orona-Cordova Northridge, CA 91330	IND COM OTH PTY SCC	California State University, Northridge Faculty Member	\$15.00	\$180.00	
12/18/2017	Roberta Orona-Cordova Northridge, CA 91330	IND COM OTH PTY SCC	California State University, Northridge Faculty Member	\$15.00	\$180.00	

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*Contributor Codes

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Amounts may be rounded

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Monetary Contributions Received			whole dollars.	from 07/01/2017	•	CALIFORNIA 460		
SEE INSTRUCTIONS O	N REVERSE			through12/31/2017	7	Page .	88 of 142	
NAME OF FILER Faculty for Our Univers	ity's Future, Local Committee, sponsored by the California Facult	y Association				I.D. Nu 123372		
DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SEI F-EMPL OYED, ENTER NAME)	AMOUNT RECEIVED THIS	CUMULATIVE TO	EAR	PER ELECTION TO DATE	

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
7/31/2017	Jocelyn Pacleb Pomona, CA 91768	IND COM OTH PTY SCC	Cal Poly, Pomona Faculty Member	\$25.00	\$300.00	
8/28/2017	Jocelyn Pacleb Pomona, CA 91768	IND COM OTH PTY SCC	Cal Poly, Pomona Faculty Member	\$25.00	\$300.00	
9/14/2017	Jocelyn Pacleb Pomona, CA 91768	IND COM OTH PTY SCC	Cal Poly, Pomona Faculty Member	\$25.00	\$300.00	
10/9/2017	Jocelyn Pacleb Pomona, CA 91768	IND COM OTH PTY SCC	Cal Poly, Pomona Faculty Member	\$25.00	\$300.00	
12/4/2017	Jocelyn Pacleb Pomona, CA 91768	IND COM OTH PTY SCC	Cal Poly, Pomona Faculty Member	\$25.00	\$300.00	

SUBTOTAL

*Contributor Codes

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Monetary Contributions Received	to whole dollars.			Statement covers period			CALIFORNIA A		
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IAME OF FILER						I.D. N	umber		
aculty for Our University's Future, Local Committee, sponsored by the California Facu	ılty Association					12337	22		

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
12/18/2017	Jocelyn Pacleb Pomona, CA 91768	IND COM OTH PTY SCC	Cal Poly, Pomona Faculty Member	\$25.00	\$300.00	
7/31/2017	Sue Pak Sacramento, CA 95814	IND COM OTH PTY SCC	California Faculty Association Staff Member	\$25.00	\$300.00	
8/28/2017	Sue Pak Sacramento, CA 95814	IND COM OTH PTY SCC	California Faculty Association Staff Member	\$25.00	\$300.00	
9/14/2017	Sue Pak Sacramento, CA 95814	IND COM OTH PTY SCC	California Faculty Association Staff Member	\$25.00	\$300.00	
10/9/2017	Sue Pak Sacramento, CA 95814	IND COM OTH PTY SCC	California Faculty Association Staff Member	\$25.00	\$300.00	

SUBTOTAL

*Contributor Codes

IND - Individual

COM - Recipient Committee (other than PTY or SCC)

OTH - Other

PTY - Political Party

SCC - Small Contributor Committee

Type or print in ink.
Amounts may be rounded

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Monetary Contributions Received			whole dollars.	Statement cov. 67/01/201	•	CALIFORNIA 460		
SEE INSTRUCTION	IS ON REVERSE			through12/31/201	7	Page .	90 of 142	
NAME OF FILER Faculty for Our Uni	versity's Future, Local Committee, sponsored by the California Facu	alty Association				I.D. No 123372		
	FULL NAME MAILING ADDRESS		IF AN INDIVIDUAL, ENTER	AMOUNT	CUMULATIVE TO	DATE	PER ELECTION	

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
12/4/2017	Sue Pak Sacramento, CA 95814	IND COM OTH PTY SCC	California Faculty Association Staff Member	\$25.00	\$300.00	
12/18/2017	Sue Pak Sacramento, CA 95814	IND COM OTH PTY SCC	California Faculty Association Staff Member	\$25.00	\$300.00	
7/31/2017	Carla Pinkney Sacramento, CA 95814	IND COM OTH PTY SCC	California Faculty Association Staff Member	\$25.00	\$250.00	
8/28/2017	Carla Pinkney Sacramento, CA 95814	IND COM OTH PTY SCC	California Faculty Association Staff Member	\$25.00	\$250.00	
9/14/2017	Carla Pinkney Sacramento, CA 95814	IND COM OTH PTY SCC	California Faculty Association Staff Member	\$25.00	\$250.00	

SUBTOTAL

*Contributor Codes

IND - Individual

COM - Recipient Committee (other than PTY or SCC)

OTH - Other

PTY - Political Party

SCC - Small Contributor Committee

Type or print in ink.
Amounts may be rounded to whole dollars.

SCHEDULE A (CONT.)

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Statement covers period

				from07/01/201	7	F	ORM 400
SEE INSTRUCTIO	ONS ON REVERSE			through 12/31/201	7	Page .	91 of 142
NAME OF FILER Faculty for Our U	niversity's Future, Local Committee, sponsored by the California Fac			I.D. No 123372			
DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO CALENDAR YE (JAN. 1 - DEC.	EAR	PER ELECTION TO DATE (IF REQUIRED)
10/9/2017	Carla Pinkney Sacramento, CA 95814	IND COM OTH PTY SCC	California Faculty Association Staff Member	\$25.00	\$250.00		
7/31/2017	Vivian Price Carson, CA 90747	IND COM OTH PTY	California State University, Dominguez Hills Faculty Member	\$15.00	\$180.00		
8/28/2017	Vivian Price Carson, CA 90747	IND COM OTH PTY SCC	California State University, Dominguez Hills Faculty Member	\$15.00	\$180.00		
9/14/2017	Vivian Price Carson, CA 90747	IND COM OTH PTY	California State University, Dominguez Hills Faculty Member	\$15.00	\$180.00		

SUBTOTAL

\$15.00

\$180.00

California State University, Dominguez Hills Faculty Member

IND

☐ COM ☐ OTH ☐ PTY ☐ SCC

*Contributor Codes

IND - Individual

10/9/2017

COM - Recipient Committee (other than PTY or SCC)

Vivian Price

Carson, CA 90747

OTH - Other

PTY - Political Party

SCC - Small Contributor Committee

Type or print in ink.
Amounts may be rounded

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Statement covers period

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SEE INSTRUCTIO	DNS ON REVERSE			through	7	Page	92 of 142
NAME OF FILER Faculty for Our U	I.D. N 12337	umber 22					
DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO CALENDAR YE (JAN. 1 - DEC.	EAR	PER ELECTION TO DATE (IF REQUIRED)
12/4/2017	Vivian Price Carson, CA 90747	IND COM OTH PTY SCC	California State University, Dominguez Hills Faculty Member	\$15.00	\$180.00		
12/18/2017	Vivian Price Carson, CA 90747	IND COM OTH PTY SCC	California State University, Dominguez Hills Faculty Member	\$15.00	\$180.00		
7/31/2017	Jennifer A. Quinonez-Skinner Northridge, CA 91330	IND COM OTH PTY SCC	California State University, Northridge Faculty Member	\$50.00	\$600.00		
8/28/2017	Jennifer A. Quinonez-Skinner Northridge, CA 91330	IND COM OTH PTY SCC	California State University, Northridge Faculty Member	\$50.00	\$600.00		
9/14/2017	Jennifer A. Quinonez-Skinner Northridge, CA 91330	IND COM	California State University, Northridge Faculty Member	\$50.00	\$600.00		

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PTY
SCC

SUBTOTAL

*Contributor Codes

IND - Individual

COM - Recipient Committee (other than PTY or SCC)

OTH - Other

PTY - Political Party

SCC - Small Contributor Committee

Type or print in ink. Amounts may be rounded

SCHEDULE A (CONT.)

Monetary Contributions Received			to whole dollars.		Statement covers period from 07/01/2017		CALIFORNIA 460 FORM	
SEE INSTRUCTION	DNS ON REVERSE			through	7	Page	93 of 142	
NAME OF FILER Faculty for Our U	niversity's Future, Local Committee, sponsored by the California Fac	ulty Association				I.D. N 123372	umber 22	
DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO CALENDAR YI (JAN. 1 - DEC.	EAR	PER ELECTION TO DATE (IF REQUIRED)	
10/9/2017	Jennifer A. Quinonez-Skinner Northridge, CA 91330	IND COM OTH PTY SCC	California State University, Northridge Faculty Member	\$50.00	\$600.00			
12/4/2017	Jennifer A. Quinonez-Skinner Northridge, CA 91330	IND COM OTH PTY SCC	California State University, Northridge Faculty Member	\$50.00	\$600.00			
12/18/2017	Jennifer A. Quinonez-Skinner Northridge, CA 91330	IND COM OTH PTY SCC	California State University, Northridge Faculty Member	\$50.00	\$600.00			
7/31/2017	Lynda S. Radican Sacramento, CA 95819	IND COM OTH PTY SCC	Sacramento State University Faculty Member	\$25.00	\$300.00			
8/28/2017	Lynda S. Radican Sacramento, CA 95819	IND COM	Sacramento State University Faculty Member	\$25.00	\$300.00			

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*Contributor Codes

IND - Individual

COM - Recipient Committee (other than PTY or SCC)

OTH - Other

PTY - Political Party

SCC - Small Contributor Committee

Type or print in ink.
Amounts may be rounded

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Monetary Co	ntributions Received		whole dollars.	Statement coverage from 07/01/2011	•	CAL F	FORM 460
SEE INSTRUCTIONS O	N REVERSE			through	7	Page	94 of 142
NAME OF FILER Faculty for Our Univers	ity's Future, Local Committee, sponsored by the California Fa	culty Association				I.D. N 12337	lumber 22
DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO CALENDAR Y (JAN. 1 - DEC	'EAR	PER ELECTION TO DATE (IF REQUIRED)

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
9/14/2017	Lynda S. Radican Sacramento, CA 95819	IND COM OTH PTY SCC	Sacramento State University Faculty Member	\$25.00	\$300.00	
10/9/2017	Lynda S. Radican Sacramento, CA 95819	IND COM OTH PTY SCC	Sacramento State University Faculty Member	\$25.00	\$300.00	
12/4/2017	Lynda S. Radican Sacramento, CA 95819	IND COM OTH PTY SCC	Sacramento State University Faculty Member	\$25.00	\$300.00	
12/18/2017	Lynda S. Radican Sacramento, CA 95819	IND COM OTH PTY SCC	Sacramento State University Faculty Member	\$25.00	\$300.00	
7/31/2017	Gretchen M. Reevy-Manning Hayward, CA 94543	IND COM OTH PTY SCC	California State University, East Bay Faculty Member	\$15.00	\$180.00	

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*Contributor Codes

IND - Individual

COM - Recipient Committee (other than PTY or SCC)

OTH - Other

PTY - Political Party

SCC - Small Contributor Committee

Gretchen M. Reevy-Manning Hayward, CA 94543

Gretchen M. Reevy-Manning Hayward, CA 94543

Gretchen M. Reevy-Manning Hayward, CA 94543

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Monetary Contributions Received			o whole dollars.	Statement cover from 07/01/2017	•	CALIFORNIA 460		
SEE INSTRUCTION	NS ON REVERSE			through12/31/2017	7	Page	95 of 142	
NAME OF FILER Faculty for Our Uni	iversity's Future, Local Committee, sponsored by the California Faculty	Association				I.D. N 123372		
DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO CALENDAR YE (JAN. 1 - DEC.	EAR	PER ELECTION TO DATE (IF REQUIRED)	
8/28/2017	Gretchen M. Reevy-Manning Hayward, CA 94543	IND COM OTH PTY SCC	California State University, East Bay Faculty Member	\$15.00	\$180.00			
9/14/2017	Gretchen M. Reevy-Manning Hayward, CA 94543	IND COM OTH PTY SCC	California State University, East Bay Faculty Member	\$15.00	\$180.00			

California State University, East

California State University, East

California State University, East

Bay Faculty Member

Bay Faculty Member

Bay Faculty Member

\$15.00

\$15.00

\$15.00

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COM OTH □ PTY ☐ SCC

SUBTOTAL

\$180.00

\$180.00

\$180.00

*Contributor Codes

IND - Individual

10/9/2017

12/4/2017

12/18/2017

COM - Recipient Committee (other than PTY or SCC)

OTH - Other

PTY - Political Party

SCC - Small Contributor Committee

Type or print in ink.
Amounts may be rounded

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Monetary Contribution	ns Received		whole dollars.	Stat	07/01/2017	•	CALI F	FORNIA ORM	460	
SEE INSTRUCTIONS ON REVERSE				through	12/31/2017	7	Page .	96	of_142	_
NAME OF FILER aculty for Our University's Future, Loca	d Committee, sponsored by the California Faculty	Association					I.D. No 123372			
										_

DATE	FULL NAME, MAILING ADDRESS	CONTRIBUTOR	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER	AMOUNT RECEIVED THIS	CUMULATIVE TO DATE CALENDAR YEAR	PER ELECTION TO DATE
RECEIVED	AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE *	(IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	PERIOD	(JAN. 1 - DEC. 31)	(IF REQUIRED)
7/31/2017	Mary J. Rivera Long Beach, CA 90804	IND COM OTH PTY SCC	California State University, Long Beach Faculty Member	\$25.00	\$225.00	
8/28/2017	Mary J. Rivera Long Beach, CA 90804	IND COM OTH PTY SCC	California State University, Long Beach Faculty Member	\$25.00	\$225.00	
9/14/2017	Mary J. Rivera Long Beach, CA 90804	IND COM OTH PTY SCC	California State University, Long Beach Faculty Member	\$25.00	\$225.00	
7/31/2017	Preston Rudy San Jose, CA 95192	IND COM OTH PTY SCC	San Jose State University Faculty Member	\$15.00	\$180.00	
8/28/2017	Preston Rudy San Jose, CA 95192	IND COM OTH PTY SCC	San Jose State University Faculty Member	\$15.00	\$180.00	
			CURTOTAL			

SUBTOTAL

*Contributor Codes

IND - Individual

COM - Recipient Committee (other than PTY or SCC)

OTH - Other

PTY - Political Party

SCC - Small Contributor Committee

Type or print in ink.
Amounts may be rounded

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Statement covers period

Monetary Contributions Neceived		to	o whole dollars.	from07/01/2017		FORM 46U	
SEE INSTRUCTIO	NS ON REVERSE			through12/31/201	7	Page	97 of 142
NAME OF FILER Faculty for Our U	niversity's Future, Local Committee, sponsored by the California Fact	ulty Association				I.D. N 12337	umber 22
DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO CALENDAR Y (JAN. 1 - DEC.	EAR	PER ELECTION TO DATE (IF REQUIRED)
9/14/2017	Preston Rudy San Jose, CA 95192	IND COM OTH PTY SCC	San Jose State University Faculty Member	\$15.00	\$180.00		
10/9/2017	Preston Rudy San Jose, CA 95192	IND COM OTH PTY SCC	San Jose State University Faculty Member	\$15.00	\$180.00		
12/4/2017	Preston Rudy San Jose, CA 95192	IND COM OTH PTY SCC	San Jose State University Faculty Member	\$15.00	\$180.00		
12/18/2017	Preston Rudy San Jose, CA 95192	IND COM OTH PTY	San Jose State University Faculty Member	\$15.00	\$180.00		

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\$50.00

\$600.00

California State University, Stanislaus Faculty Member

*Contributor Codes

IND - Individual

7/31/2017

COM - Recipient Committee (other than PTY or SCC)

John J. Sarraille

Turlock, CA 95382

OTH - Other

PTY - Political Party

SCC - Small Contributor Committee

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Amounts may be rounded

SCHEDULE A (CONT.)

Statement covers period

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SEE INSTRUCTION	ONS ON REVERSE			through	7	Page	<u>98</u> of <u>142</u>
NAME OF FILER Faculty for Our U	'niversity's Future, Local Committee, sponsored by the California Facu	alty Association				I.D. N 12337	umber 22
DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO CALENDAR YE (JAN. 1 - DEC.	AR	PER ELECTION TO DATE (IF REQUIRED)
8/28/2017	John J. Sarraille Turlock, CA 95382	IND COM OTH PTY SCC	California State University, Stanislaus Faculty Member	\$50.00	\$600.00		
9/14/2017	John J. Sarraille Turlock, CA 95382	IND COM OTH PTY SCC	California State University, Stanislaus Faculty Member	\$50.00	\$600.00		
10/9/2017	John J. Sarraille Turlock, CA 95382	IND COM OTH PTY SCC	California State University, Stanislaus Faculty Member	\$50.00	\$600.00		
12/4/2017	John J. Sarraille Turlock, CA 95382	IND COM OTH PTY SCC	California State University, Stanislaus Faculty Member	\$50.00	\$600.00		
12/18/2017	John J. Sarraille Turlock, CA 95382	IND COM	California State University, Stanislaus	\$50.00	\$600.00		

Faculty Member

COM

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*Contributor Codes

IND - Individual

COM - Recipient Committee (other than PTY or SCC)

OTH - Other

PTY - Political Party

SCC - Small Contributor Committee

Fresno, CA 93740

Judith C. Scott

Fresno, CA 93740

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Amounts may be rounded to whole dollars.

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SEE INSTRUCTION	DNS ON REVERSE			through12/31/201	7	Page	99 of 142
NAME OF FILER Faculty for Our U	niversity's Future, Local Committee, sponsored by the California Facu	ulty Association				I.D. No 123372	
DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO CALENDAR YI (JAN. 1 - DEC.	EAR	PER ELECTION TO DATE (IF REQUIRED)
7/31/2017	Judith C. Scott Fresno, CA 93740	■ IND □ COM □ OTH □ PTY □ SCC	California State University, Fresno Faculty Member	\$25.00	\$300.00		
8/28/2017	Judith C. Scott Fresno, CA 93740	IND COM OTH PTY SCC	California State University, Fresno Faculty Member	\$25.00	\$300.00		
9/14/2017	Judith C. Scott Fresno, CA 93740	IND COM OTH PTY SCC	California State University, Fresno Faculty Member	\$25.00	\$300.00		
10/9/2017	Judith C. Scott	■ IND	California State University,	\$25.00	\$300.00	_	

Fresno

Faculty Member

Fresno Faculty Member

California State University,

☐ COM

OTH PTY SCC

☐ COM ☐ OTH ☐ PTY ☐ SCC

\$300.00

\$25.00

Statement covers period

*Contributor Codes

IND - Individual

12/4/2017

COM - Recipient Committee (other than PTY or SCC)

OTH - Other

PTY - Political Party

SCC - Small Contributor Committee

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Amounts may be rounded

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Monetary Contributions Received	to whole dollars.	Statement cov	ers period	CALIFORNIA 460		
		from07/01/201	7	FORM	TUU	
SEE INSTRUCTIONS ON REVERSE		through 12/31/201	7	Page	of_ ¹⁴²	
NAME OF FILER				I.D. Number		
aculty for Our University's Future, Local Committee, sponsored by the California Facu	lty Association			1233722		

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
12/18/2017	Judith C. Scott Fresno, CA 93740	IND COM OTH PTY SCC	California State University, Fresno Faculty Member	\$25.00	\$300.00	
8/28/2017	Terry Scott Sacramento, CA 95814	IND COM OTH PTY SCC	California Faculty Association Staff Member	\$25.00	\$125.00	
9/14/2017	Terry Scott Sacramento, CA 95814	IND COM OTH PTY SCC	California Faculty Association Staff Member	\$25.00	\$125.00	
10/9/2017	Terry Scott Sacramento, CA 95814	IND COM OTH PTY SCC	California Faculty Association Staff Member	\$25.00	\$125.00	
12/4/2017	Terry Scott Sacramento, CA 95814	IND COM OTH PTY SCC	California Faculty Association Staff Member	\$25.00	\$125.00	

SUBTOTAL

*Contributor Codes

IND - Individual

COM - Recipient Committee (other than PTY or SCC)

OTH - Other

PTY - Political Party

SCC - Small Contributor Committee

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Statement covers period

			to whole dollars.		17	FORM 400	
SEE INSTRUCTION	DNS ON REVERSE			through	17	Page	of142
NAME OF FILER Faculty for Our U	niversity's Future, Local Committee, sponsored by the California Fac	ulty Association				I.D. N 12337	umber 22
DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO CALENDAR YE (JAN. 1 - DEC.	EAR	PER ELECTION TO DATE (IF REQUIRED)
12/18/2017	Terry Scott Sacramento, CA 95814	IND COM OTH PTY SCC	California Faculty Association Staff Member	\$25.00	\$125.00		
7/31/2017	Theodore P. Scott-Femenella Sacramento, CA 95819	IND COM OTH PTY	California State University, Sacramento Faculty Member	\$15.00	\$180.00		
8/28/2017	Theodore P. Scott-Femenella Sacramento, CA 95819	IND COM OTH PTY SCC	California State University, Sacramento Faculty Member	\$15.00	\$180.00		
9/14/2017	Theodore P. Scott-Femenella Sacramento, CA 95819	IND COM OTH PTY SCC	California State University, Sacramento Faculty Member	\$15.00	\$180.00		
10/9/2017	Theodore P. Scott-Femenella Sacramento, CA 95819	IND COM	California State University, Sacramento	\$15.00	\$180.00		

Sacramento

Faculty Member

COM

OTH ☐ PTY \square scc

*Contributor Codes

IND - Individual

COM - Recipient Committee (other than PTY or SCC)

OTH - Other

PTY - Political Party

SCC - Small Contributor Committee

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Monetary Contributions Received			to whole dollars.		Statement covers period from 07/01/2017		CALIFORNIA 460 FORM	
SEE INSTRUCTION	DNS ON REVERSE	through12/31/201	7	Page 102 of 142				
NAME OF FILER Faculty for Our U	niversity's Future, Local Committee, sponsored by the California Fac	ulty Association				I.D. N 12337	umber 22	
DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO CALENDAR YI (JAN. 1 - DEC.	EAR	PER ELECTION TO DATE (IF REQUIRED)	
12/4/2017	Theodore P. Scott-Femenella Sacramento, CA 95819	IND COM OTH PTY SCC	California State University, Sacramento Faculty Member	\$15.00	\$180.00			
12/18/2017	Theodore P. Scott-Femenella Sacramento, CA 95819	IND COM OTH PTY SCC	California State University, Sacramento Faculty Member	\$15.00	\$180.00			
7/31/2017	Howard Benjamin Shaeffer Arcata, CA 95521	IND COM OTH PTY SCC	California State University, Humboldt Faculty Member	\$25.00	\$300.00			
8/28/2017	Howard Benjamin Shaeffer Arcata, CA 95521	IND COM OTH PTY SCC	California State University, Humboldt Faculty Member	\$25.00	\$300.00			
9/14/2017	Howard Benjamin Shaeffer Arcata, CA 95521	IND COM	California State University, Humboldt	\$25.00	\$300.00			

Faculty Member

COM

OTH PTY \square scc

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*Contributor Codes

IND - Individual

COM - Recipient Committee (other than PTY or SCC)

OTH - Other

PTY - Political Party

SCC - Small Contributor Committee

Type or print in ink.
Amounts may be rounded

SCHEDULE A (CONT.)

Monetary Contributions Received		to	to whole dollars.		from07/01/2017		FORM 460	
SEE INSTRUCTIO	ONS ON REVERSE		through	7	Page <u>103</u> of <u>142</u>			
NAME OF FILER Faculty for Our U	niversity's Future, Local Committee, sponsored by the California Facu	ulty Association				I.D. N 12337	lumber 22	
DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO CALENDAR Y (JAN. 1 - DEC.	EAR	PER ELECTION TO DATE (IF REQUIRED)	
10/9/2017	Howard Benjamin Shaeffer Arcata, CA 95521	■ IND □ COM □ OTH □ PTY □ SCC	California State University, Humboldt Faculty Member	\$25.00	\$300.00			
12/4/2017	Howard Benjamin Shaeffer Arcata, CA 95521	IND COM OTH PTY SCC	California State University, Humboldt Faculty Member	\$25.00	\$300.00			
12/18/2017	Howard Benjamin Shaeffer Arcata, CA 95521	IND COM OTH PTY SCC	California State University, Humboldt Faculty Member	\$25.00	\$300.00			
7/31/2017	Aimee Shreck Sacramento, CA 95814	IND COM	California Faculty Association Staff Member	\$25.00	\$275.00			

California Faculty Association Staff Member

OTH
PTY
SCC

☐ COM ☐ OTH ☐ PTY ☐ SCC

\$275.00

\$25.00

Statement covers period

*Contributor Codes

IND - Individual

8/28/2017

COM - Recipient Committee (other than PTY or SCC)

OTH - Other

PTY - Political Party

SCC - Small Contributor Committee

Aimee Shreck

Sacramento, CA 95814

Type or print in ink.
Amounts may be rounded

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Monetary Contributions Received			to whole dollars.		ers period	CALIFORNIA 460		
SEE INSTRUCTION	NS ON REVERSE			through12/31/2017	7	Page	of	
NAME OF FILER Faculty for Our Un	iversity's Future, Local Committee, sponsored by the California Faculty	Association				I.D. N 12337	lumber 22	
DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO CALENDAR YE (JAN. 1 - DEC.	EAR	PER ELECTION TO DATE (IF REQUIRED)	
9/14/2017	Aimee Shreck Sacramento, CA 95814	IND COM	California Faculty Association Staff Member	\$25.00	\$275.00			

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
9/14/2017	Aimee Shreck Sacramento, CA 95814	IND COM OTH PTY SCC	California Faculty Association Staff Member	\$25.00	\$275.00	
10/9/2017	Aimee Shreck Sacramento, CA 95814	IND COM OTH PTY SCC	California Faculty Association Staff Member	\$25.00	\$275.00	
12/4/2017	Aimee Shreck Sacramento, CA 95814	IND COM OTH PTY SCC	California Faculty Association Staff Member	\$25.00	\$275.00	
12/18/2017	Aimee Shreck Sacramento, CA 95814	IND COM OTH PTY SCC	California Faculty Association Staff Member	\$25.00	\$275.00	
7/31/2017	Timothy G. Sistrunk Chico, CA 95929	IND COM OTH PTY SCC	California State University, Chico Faculty Member	\$50.00	\$600.00	

SUBTOTAL

*Contributor Codes

IND - Individual

COM - Recipient Committee (other than PTY or SCC)

OTH - Other

PTY - Political Party

SCC - Small Contributor Committee

Type or print in ink.
Amounts may be rounded

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Monetary Contributions Received		to whole dollars.		Statement cover	•	CALIFORNIA 460		
SEE INSTRUCTION	NS ON REVERSE			through12/31/2017		Page		
NAME OF FILER Faculty for Our Uni	iversity's Future, Local Committee, sponsored by the California Faculty	Association				I.D. N 12337	umber 22	
DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO CALENDAR YE (JAN. 1 - DEC.	EAR	PER ELECTION TO DATE (IF REQUIRED)	
8/28/2017	Timothy G. Sistrunk Chico, CA 95929	IND COM OTH PTY	California State University, Chico Faculty Member	\$50.00	\$600.00			

12/18/2017 Timo Chico	nothy G. Sistrunk co, CA 95929	OTH PTY SCC IND COM OTH PTY SCC	California State University, Chico Faculty Member	\$50.00	\$600.00	
		☐ PTY				
12/4/2017 Timo Chico	oothy G. Sistrunk co, CA 95929	■ IND □ COM	California State University, Chico Faculty Member	\$50.00	\$600.00	
Chico	oothy G. Sistrunk co, CA 95929	IND COM OTH PTY SCC	California State University, Chico Faculty Member	\$50.00	\$600.00	
9/14/2017 Timo Chico	oothy G. Sistrunk co, CA 95929	IND COM OTH PTY SCC	California State University, Chico Faculty Member	\$50.00	\$600.00	
8/28/2017 Timo Chico	oothy G. Sistrunk co, CA 95929	COM OTH PTY SCC	California State University, Chico Faculty Member	\$50.00	\$600.00	

*Contributor Codes

IND - Individual

COM - Recipient Committee (other than PTY or SCC)

OTH - Other

PTY - Political Party

SCC - Small Contributor Committee

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Monetary Contributions Received		Itions Received to whole dollars.		Statement covers period from 07/01/2017		CALIFORNIA 460	
SEE INSTRUCTIO	NS ON REVERSE			through12/31/201	7	Page	
NAME OF FILER Faculty for Our U	niversity's Future, Local Committee, sponsored by the California Fac	culty Association				I.D. N 12337	umber 22
DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO CALENDAR Y (JAN. 1 - DEC	EAR	PER ELECTION TO DATE (IF REQUIRED)
7/31/2017	Vergion J. Smith Sacramento, CA 95814	IND COM OTH PTY SCC	California Faculty Association Staff Member	\$20.00	\$200.00		
8/28/2017	Vergion J. Smith Sacramento, CA 95814	IND COM OTH PTY SCC	California Faculty Association Staff Member	\$20.00	\$200.00		
9/14/2017	Vergion J. Smith Sacramento, CA 95814	IND COM OTH PTY SCC	California Faculty Association Staff Member	\$20.00	\$200.00		
10/9/2017	Vergion J. Smith Sacramento, CA 95814	IND COM OTH PTY SCC	California Faculty Association Staff Member	\$20.00	\$200.00		

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\$20.00

\$200.00

California Faculty Association Staff Member

*Contributor Codes

IND - Individual

12/4/2017

COM - Recipient Committee (other than PTY or SCC)

Vergion J. Smith Sacramento, CA 95814

OTH - Other

PTY - Political Party

SCC - Small Contributor Committee

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Monetary Contributions Received		ributions Received to whole dollars.		Statement covers period from 07/01/2017		CALIFORNIA 460	
SEE INSTRUCTION	DNS ON REVERSE			through12/31/201	7	Page	107 of 142
NAME OF FILER Faculty for Our U	niversity's Future, Local Committee, sponsored by the California Fa	culty Association				I.D. No 123372	
DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO CALENDAR Y (JAN. 1 - DEC	EAR	PER ELECTION TO DATE (IF REQUIRED)
12/18/2017	Vergion J. Smith Sacramento, CA 95814	IND COM OTH PTY SCC	California Faculty Association Staff Member	\$20.00	\$200.00		
7/31/2017	Lisa M. Sparaco San Diego, CA 92182	IND COM OTH PTY SCC	San Diego State University Faculty Member	\$15.00	\$180.00		
8/28/2017	Lisa M. Sparaco San Diego, CA 92182	IND COM OTH PTY SCC	San Diego State University Faculty Member	\$15.00	\$180.00		
9/14/2017	Lisa M. Sparaco San Diego, CA 92182	IND COM OTH PTY	San Diego State University Faculty Member	\$15.00	\$180.00		

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\$15.00

\$180.00

San Diego State University Faculty Member

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*Contributor Codes

IND - Individual

10/9/2017

COM - Recipient Committee (other than PTY or SCC)

OTH - Other

PTY - Political Party

SCC - Small Contributor Committee

Lisa M. Sparaco San Diego, CA 92182

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Monetary Contributions Received		Contributions Received to whole dollars.		Statement covers period from 07/01/2017		CALIFORNIA 460	
SEE INSTRUCTIO	ONS ON REVERSE			through12/31/201	7	Page	
NAME OF FILER Faculty for Our U	niversity's Future, Local Committee, sponsored by the California Fac	culty Association				I.D. N 123372	
DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO CALENDAR Y (JAN. 1 - DEC	EAR	PER ELECTION TO DATE (IF REQUIRED)
12/4/2017	Lisa M. Sparaco San Diego, CA 92182	IND COM OTH PTY SCC	San Diego State University Faculty Member	\$15.00	\$180.00		
12/18/2017	Lisa M. Sparaco San Diego, CA 92182	IND COM OTH PTY SCC	San Diego State University Faculty Member	\$15.00	\$180.00		
7/31/2017	Alice Sunshine Sacramento, CA 95814	IND COM OTH PTY SCC	California Faculty Association Staff Member	\$25.00	\$300.00		
8/28/2017	Alice Sunshine Sacramento, CA 95814	IND COM OTH PTY SCC	California Faculty Association Staff Member	\$25.00	\$300.00		

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California Faculty Association Staff Member

\$25.00

\$300.00

*Contributor Codes

IND - Individual

9/14/2017

COM - Recipient Committee (other than PTY or SCC)

OTH - Other

PTY - Political Party

SCC - Small Contributor Committee

Alice Sunshine

Sacramento, CA 95814

Alice Sunshine Sacramento, CA 95814

Lillian K. Taiz

Lillian K. Taiz

Los Angeles, CA 90032

Los Angeles, CA 90032

Type or print in ink.
Amounts may be rounded

SCHEDULE A (CONT.)

Monetary (Contributions Received		whole dollars.	Statement cover	•	CAL F	IFORNIA 460
SEE INSTRUCTION	NS ON REVERSE			through12/31/2017	7	Page	of 142
NAME OF FILER Faculty for Our University's Future, Local Committee, sponsored by the California Faculty Association						I.D. N 12337	umber 22
DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO CALENDAR YE (JAN. 1 - DEC.	EAR	PER ELECTION TO DATE (IF REQUIRED)
10/9/2017	Alice Sunshine Sacramento, CA 95814	IND COM OTH PTY SCC	California Faculty Association Staff Member	\$25.00	\$300.00		
12/4/2017	Alice Sunshine Sacramento, CA 95814	IND COM OTH PTY	California Faculty Association Staff Member	\$25.00	\$300.00		

California Faculty Association

California State University, Los

California State University, Los

Staff Member

Angeles

Faculty Member

Angeles Faculty Member \$25.00

\$75.00

\$75.00

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OTH PTY SCC

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SUBTOTAL	-	

\$300.00

\$825.00

\$825.00

*Contributor Codes

IND - Individual

12/18/2017

7/31/2017

8/28/2017

COM - Recipient Committee (other than PTY or SCC)

OTH - Other

PTY - Political Party

SCC - Small Contributor Committee

Type or print in ink.
Amounts may be rounded

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Monetary Co	etary Contributions Received to whole dollars. Statement covers period from 07/01/2017				CALIFORNIA 460			
SEE INSTRUCTIONS O	N REVERSE			through	7	Page .	110 of 142	
NAME OF FILER Faculty for Our Univers	ity's Future, Local Committee, sponsored by the California Facu	ty Association				I.D. No 123372		
DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER	AMOUNT RECEIVED THIS	CUMULATIVE TO	EAR	PER ELECTION TO DATE	

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FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
Lillian K. Taiz Los Angeles, CA 90032	IND COM OTH PTY SCC	California State University, Los Angeles Faculty Member	\$75.00	\$825.00	
Lillian K. Taiz Los Angeles, CA 90032	IND COM OTH PTY SCC	California State University, Los Angeles Faculty Member	\$75.00	\$825.00	
Lillian K. Taiz Los Angeles, CA 90032	IND COM OTH PTY SCC	California State University, Los Angeles Faculty Member	\$75.00	\$825.00	
Molly A. Talcott Los Angeles, CA 90032	IND COM OTH PTY SCC	California State University, Los Angeles Faculty Member	\$25.00	\$300.00	
Molly A. Talcott Los Angeles, CA 90032	IND COM OTH PTY SCC	California State University, Los Angeles Faculty Member	\$25.00	\$300.00	
	AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER) Lillian K. Taiz Los Angeles, CA 90032 Lillian K. Taiz Los Angeles, CA 90032 Lillian K. Taiz Los Angeles, CA 90032 Molly A. Talcott Los Angeles, CA 90032	AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER) Lillian K. Taiz Los Angeles, CA 90032 Molly A. Talcott Los Angeles, CA 90032	AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER) Lillian K. Taiz Los Angeles, CA 90032 Lillian K. Taiz Los Angeles,	AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER) Lillian K. Taiz Los Angeles, CA 90032 Lillian K. Taiz Los Angeles Faculty Member S75.00 S75.00 S75.00 S75.00 S75.00 S75.00 S75.00 Angeles Faculty Member S25.00 Angeles Faculty Member S25.00 Angeles Faculty Member	AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER LD. NUMBER) Lillian K. Taiz Los Angeles, CA 90032 Los Angeles, CA 90032 Lillian K. Taiz Los Angeles, CA 90032 Lillian K. Taiz Los Angeles, CA 90032 Los Angeles, CA 90032 Los Angeles, CA 90032 Molly A. Talcott Los Angeles, CA 90032

SUBTOTAL

*Contributor Codes

IND - Individual

COM - Recipient Committee (other than PTY or SCC)

OTH - Other

PTY - Political Party

SCC - Small Contributor Committee

Type or print in ink. Amounts may be rounded

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Monetary Contributions Received		ry Contributions Received to whole dollars.		Statement cov	•	CALIFORNIA 460	
SEE INSTRUCTIO	DNS ON REVERSE			through 12/31/201	7	Page	of
NAME OF FILER Faculty for Our U	niversity's Future, Local Committee, sponsored by the California Fac	culty Association				I.D. N 12337	umber 22
DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO CALENDAR Y (JAN. 1 - DEC	EAR	PER ELECTION TO DATE (IF REQUIRED)
9/14/2017	Molly A. Talcott Los Angeles, CA 90032	IND COM OTH PTY SCC	California State University, Los Angeles Faculty Member	\$25.00	\$300.00		
10/9/2017	Molly A. Talcott Los Angeles, CA 90032	IND COM OTH PTY SCC	California State University, Los Angeles Faculty Member	\$25.00	\$300.00		
12/4/2017	Molly A. Talcott Los Angeles, CA 90032	IND COM OTH PTY SCC	California State University, Los Angeles Faculty Member	\$25.00	\$300.00		
12/18/2017	Molly A. Talcott Los Angeles, CA 90032	IND COM OTH	California State University, Los Angeles Faculty Member	\$25.00	\$300.00		

California Faculty Association Staff Member

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SUBTOTAL	

\$10.00

\$120.00

*Contributor Codes

IND - Individual

7/31/2017

COM - Recipient Committee (other than PTY or SCC)

Jackie Teepen Sacramento, CA 95814

OTH - Other

PTY - Political Party

SCC - Small Contributor Committee

Schedule A (Continuation Sheet)

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Amounts may be rounded

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Monetary Contributions Received		whole dollars.	Sta	Statement covers period			CALIFORNIA 46		
•			from	07/01/2017	7	F	ORM	400	
EEE INSTRUCTIONS ON REVERSE			through	n_12/31/2017	7	Page		of 142	
NAME OF FILER						I.D. N	umber		
aculty for Our University's Future, Local Committee, sponsored by the California Facu	lty Association					12337	22		
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DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)			
8/28/2017	Jackie Teepen Sacramento, CA 95814	IND COM OTH PTY SCC	California Faculty Association Staff Member	\$10.00	\$120.00				
9/14/2017	Jackie Teepen Sacramento, CA 95814	IND COM OTH PTY SCC	California Faculty Association Staff Member	\$10.00	\$120.00				
10/9/2017	Jackie Teepen Sacramento, CA 95814	IND COM OTH PTY SCC	California Faculty Association Staff Member	\$10.00	\$120.00				
12/4/2017	Jackie Teepen Sacramento, CA 95814	IND COM OTH PTY SCC	California Faculty Association Staff Member	\$10.00	\$120.00				
12/18/2017	Jackie Teepen Sacramento, CA 95814	IND COM OTH PTY SCC	California Faculty Association Staff Member	\$10.00	\$120.00				
	SUBTOTAL								

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*Contributor Codes

IND - Individual

COM - Recipient Committee (other than PTY or SCC)

OTH - Other

PTY - Political Party

SCC - Small Contributor Committee

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Amounts may be rounded

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Monetary Contributions Received	to	Statement covers period			CALIFORNIA 460			
•			from	07/01/2017	7	F	ORM	400
EEE INSTRUCTIONS ON REVERSE			through	n_12/31/2017	7	Page		of 142
NAME OF FILER						I.D. N	umber	
aculty for Our University's Future, Local Committee, sponsored by the California Fa	culty Association					12337	22	
		15 AN IND 11 (ID) 11 ENTED			0.00.00		252	

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
7/31/2017	Jie Tian Fullerton, CA 92831	IND COM OTH PTY SCC	California State University, Fullerton Faculty Member	\$25.00	\$275.00	
8/28/2017	Jie Tian Fullerton, CA 92831	IND COM OTH PTY SCC	California State University, Fullerton Faculty Member	\$25.00	\$275.00	
9/14/2017	Jie Tian Fullerton, CA 92831	IND COM OTH PTY SCC	California State University, Fullerton Faculty Member	\$25.00	\$275.00	
10/9/2017	Jie Tian Fullerton, CA 92831	IND COM OTH PTY SCC	California State University, Fullerton Faculty Member	\$25.00	\$275.00	
12/18/2017	Jie Tian Fullerton, CA 92831	IND COM OTH PTY SCC	California State University, Fullerton Faculty Member	\$25.00	\$275.00	
			SUPTOTAL	•		

SUBTOTAL

*Contributor Codes

IND - Individual

COM - Recipient Committee (other than PTY or SCC)

OTH - Other

PTY - Political Party

SCC - Small Contributor Committee

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Amounts may be rounded

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Monetary Contributions Received	to whole dollars.	Statement cove	· CA	CALIFORNIA 460		
		from07/01/2017	7	FORM	-100	
SEE INSTRUCTIONS ON REVERSE		through12/31/2017	<u>7</u> Pa	ge <u>114</u> o	of_142	
NAME OF FILER faculty for Our University's Future, Local Committee, sponsored by the California Facul	ty Association			. Number 33722		

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
7/31/2017	Charles P. Toombs San Diego, CA 92182	IND COM OTH PTY SCC	California State University, San Diego Faculty Member	\$60.00	\$720.00	
8/28/2017	Charles P. Toombs San Diego, CA 92182	IND COM OTH PTY SCC	California State University, San Diego Faculty Member	\$60.00	\$720.00	
9/14/2017	Charles P. Toombs San Diego, CA 92182	IND COM OTH PTY SCC	California State University, San Diego Faculty Member	\$60.00	\$720.00	
10/9/2017	Charles P. Toombs San Diego, CA 92182	IND COM OTH PTY SCC	California State University, San Diego Faculty Member	\$60.00	\$720.00	
12/4/2017	Charles P. Toombs San Diego, CA 92182	IND COM OTH PTY SCC	California State University, San Diego Faculty Member	\$60.00	\$720.00	
			SUBTOTAL	1		

SUBTOTAL

*Contributor Codes

IND - Individual

COM - Recipient Committee (other than PTY or SCC)

OTH - Other

PTY - Political Party

SCC - Small Contributor Committee

San Bernardino, CA 92407

Nena M. Torrez San Bernardino, CA 92407

Nena M. Torrez

San Bernardino, CA 92407

Type or print in ink.
Amounts may be rounded

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Monetary Contributions Received		to whole dollars.		Statement coverage (17.01/201)	•	CALIFORNIA 460	
SEE INSTRUCTION	NS ON REVERSE			through12/31/201	7	Page	of_ 142
NAME OF FILER Faculty for Our Un	iversity's Future, Local Committee, sponsored by the California Facult	y Association				I.D. No 123372	
DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO CALENDAR YE (JAN. 1 - DEC.	AR	PER ELECTION TO DATE (IF REQUIRED)
12/18/2017	Charles P. Toombs San Diego, CA 92182	IND COM OTH PTY SCC	California State University, San Diego Faculty Member	\$60.00	\$720.00		
7/31/2017	Nena M. Torrez San Bernardino, CA 92407	IND COM OTH PTY	California State University, San Bernardino Faculty Member	\$30.00	\$360.00		
8/28/2017	Nena M. Torrez	■ IND	California State University, San	\$30.00	\$360.00		

Bernardino

Faculty Member

Faculty Member

Bernardino

Faculty Member

California State University, San Bernardino

California State University, San

\$30.00

\$30.00

COM

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IND

☐ COM

OTH PTY SCC

COM

☐ OTH ☐ PTY ☐ SCC

\$360.00

\$360.00

*Contributor Codes

IND - Individual

9/14/2017

10/9/2017

COM - Recipient Committee (other than PTY or SCC)

OTH - Other

PTY - Political Party

SCC - Small Contributor Committee

Type or print in ink. Amounts may be rounded

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Monetary Contributions Received		to whole dollars.		Statement covers period from 07/01/2017		CALIFORNIA 460 FORM	
	DNS ON REVERSE			through	7	Page	of
NAME OF FILER Faculty for Our U	niversity's Future, Local Committee, sponsored by the California Fa	culty Association				I.D. N 12337	umber 22
DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO CALENDAR Y (JAN. 1 - DEC	EAR	PER ELECTION TO DATE (IF REQUIRED)
12/4/2017	Nena M. Torrez San Bernardino, CA 92407	IND COM OTH PTY SCC	California State University, San Bernardino Faculty Member	\$30.00	\$360.00		
12/18/2017	Nena M. Torrez San Bernardino, CA 92407	IND COM OTH PTY SCC	California State University, San Bernardino Faculty Member	\$30.00	\$360.00		
7/31/2017	Tanesha Travis Sacramento, CA 95814	IND COM OTH PTY SCC	California Faculty Association Staff Member	\$15.00	\$180.00		
8/28/2017	Tanesha Travis Sacramento, CA 95814	IND COM OTH PTY	California Faculty Association Staff Member	\$15.00	\$180.00		

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\$15.00

\$180.00

California Faculty Association Staff Member

*Contributor Codes

IND - Individual

9/14/2017

COM - Recipient Committee (other than PTY or SCC)

Tanesha Travis

Sacramento, CA 95814

OTH - Other

PTY - Political Party

SCC - Small Contributor Committee

Type or print in ink.
Amounts may be rounded

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Monetary Contributions Received			whole dollars.	from 07/01/201	CALI F	CALIFORNIA 460		
SEE INSTRUCTION	IS ON REVERSE			through 12/31/201	17	Page	117 of	142
NAME OF FILER						I.D. N	umber	
Faculty for Our Uni	versity's Future, Local Committee, sponsored by the California Facult	y Association				123372	22	
	FULL NAME MAILING ADDRESS		IF AN INDIVIDUAL, ENTER	AMOUNT	CUMULATIVE TO	O DATE	PER ELE	CTION

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
10/9/2017	Tanesha Travis Sacramento, CA 95814	IND COM OTH PTY SCC	California Faculty Association Staff Member	\$15.00	\$180.00	
12/4/2017	Tanesha Travis Sacramento, CA 95814	IND COM OTH PTY SCC	California Faculty Association Staff Member	\$15.00	\$180.00	
12/18/2017	Tanesha Travis Sacramento, CA 95814	IND COM OTH PTY SCC	California Faculty Association Staff Member	\$15.00	\$180.00	
7/31/2017	Sheila R. Tully San Francisco, CA 94132	IND COM OTH PTY SCC	San Francisco State University Faculty Member	\$25.00	\$300.00	
8/28/2017	Sheila R. Tully San Francisco, CA 94132	IND COM OTH PTY SCC	San Francisco State University Faculty Member	\$25.00	\$300.00	

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*Contributor Codes

IND - Individual

COM - Recipient Committee (other than PTY or SCC)

OTH - Other

PTY - Political Party

SCC - Small Contributor Committee

Type or print in ink.
Amounts may be rounded to whole dollars.

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Statement covers period

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SEE INSTRUCTION	DNS ON REVERSE			through	7	Page	of142
NAME OF FILER Faculty for Our U	Iniversity's Future, Local Committee, sponsored by the California Fa	aculty Association				I.D. N 12337	lumber 22
DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO CALENDAR YI (JAN. 1 - DEC.	EAR	PER ELECTION TO DATE (IF REQUIRED)
9/14/2017	Sheila R. Tully San Francisco, CA 94132	IND COM OTH PTY SCC	San Francisco State University Faculty Member	\$25.00	\$300.00		
10/9/2017	Sheila R. Tully San Francisco, CA 94132	■ IND □ COM □ OTH □ PTY □ SCC	San Francisco State University Faculty Member	\$25.00	\$300.00		
12/4/2017	Sheila R. Tully San Francisco, CA 94132	IND COM OTH PTY SCC	San Francisco State University Faculty Member	\$25.00	\$300.00		
12/18/2017	Sheila R. Tully San Francisco, CA 94132	IND COM OTH PTY	San Francisco State University Faculty Member	\$25.00	\$300.00		

IND

☐ COM ☐ OTH ☐ PTY ☐ SCC

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\$25.00

\$225.00

San Francisco State University Faculty Member

*Contributor Codes

IND - Individual

7/31/2017

COM - Recipient Committee (other than PTY or SCC)

Mitch L. Turitz

San Francisco, CA 94132

OTH - Other

PTY - Political Party

SCC - Small Contributor Committee

Type or print in ink.
Amounts may be rounded

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Monetary Contributions Received			whole dollars.	Statement cover from 07/01/2017	•	CALIFORNIA 460	
SEE INSTRUCTION	NS ON REVERSE			through12/31/2017	7	Page .	119 of 142
NAME OF FILER Faculty for Our Uni	iversity's Future, Local Committee, sponsored by the California Facul	ty Association				I.D. No 123372	
5.475	FULL NAME, MAILING ADDRESS	001/70/01/700	IF AN INDIVIDUAL, ENTER	AMOUNT	CUMULATIVE TO	DATE	PER ELECTION

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
8/28/2017	Mitch L. Turitz San Francisco, CA 94132	IND COM OTH PTY SCC	San Francisco State University Faculty Member	\$25.00	\$225.00	
9/14/2017	Mitch L. Turitz San Francisco, CA 94132	IND COM OTH PTY SCC	San Francisco State University Faculty Member	\$25.00	\$225.00	
7/31/2017	Donaldo Urioste Seaside, CA 93955	IND COM OTH PTY SCC	California State University, Monterey Bay Faculty Member	\$15.00	\$180.00	
8/28/2017	Donaldo Urioste Seaside, CA 93955	IND COM OTH PTY SCC	California State University, Monterey Bay Faculty Member	\$15.00	\$180.00	
9/14/2017	Donaldo Urioste Seaside, CA 93955	IND COM OTH PTY SCC	California State University, Monterey Bay Faculty Member	\$15.00	\$180.00	

SUBTOTAL

*Contributor Codes

IND - Individual

COM - Recipient Committee (other than PTY or SCC)

OTH - Other

PTY - Political Party

SCC - Small Contributor Committee

Type or print in ink.
Amounts may be rounded

SCHEDULE A (CONT.)

Monetary	Contributions Received		nts may be rounded whole dollars.	Statement cov	•	CALI F	FORNIA 460
	ONS ON REVERSE			through12/31/201	7	Page	
NAME OF FILER Faculty for Our U	niversity's Future, Local Committee, sponsored by the California Fac	ulty Association				I.D. N 123372	
DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO CALENDAR YE (JAN. 1 - DEC.	EAR	PER ELECTION TO DATE (IF REQUIRED)
10/9/2017	Donaldo Urioste Seaside, CA 93955	IND COM OTH PTY SCC	California State University, Monterey Bay Faculty Member	\$15.00	\$180.00		
12/4/2017	Donaldo Urioste Seaside, CA 93955	IND COM OTH PTY SCC	California State University, Monterey Bay Faculty Member	\$15.00	\$180.00		
12/18/2017	Donaldo Urioste Seaside, CA 93955	IND COM OTH PTY	California State University, Monterey Bay Faculty Member	\$15.00	\$180.00		
7/31/2017	Cynthia Villanueva Carson, CA 90747	IND COM OTH PTY	California State University, Dominguez Hills Faculty Member	\$15.00	\$180.00		

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\$15.00

\$180.00

California State University, Dominguez Hills Faculty Member

*Contributor Codes

IND - Individual

8/28/2017

COM - Recipient Committee (other than PTY or SCC)

Cynthia Villanueva Carson, CA 90747

OTH - Other

PTY - Political Party

SCC - Small Contributor Committee

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Amounts may be rounded

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Monetary Contributions Received			nts may be rounded whole dollars.	Statement cov from 07/01/201		CALIFORNIA 460		
SEE INSTRUCTIO	ONS ON REVERSE			through	7	Page _	121 of 142	
NAME OF FILER Faculty for Our U	niversity's Future, Local Committee, sponsored by the California Fa	culty Association				I.D. Nu 123372		
DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO CALENDAR YE (JAN. 1 - DEC.	EAR	PER ELECTION TO DATE (IF REQUIRED)	
9/14/2017	Cynthia Villanueva Carson, CA 90747	IND COM OTH PTY SCC	California State University, Dominguez Hills Faculty Member	\$15.00	\$180.00			
10/9/2017	Cynthia Villanueva Carson, CA 90747	IND COM OTH PTY SCC	California State University, Dominguez Hills Faculty Member	\$15.00	\$180.00			
12/4/2017	Cynthia Villanueva Carson, CA 90747	IND COM OTH PTY SCC	California State University, Dominguez Hills Faculty Member	\$15.00	\$180.00			
12/18/2017	Cynthia Villanueva Carson, CA 90747	IND COM OTH PTY SCC	California State University, Dominguez Hills Faculty Member	\$15.00	\$180.00			
7/31/2017	Kevin C. Wehr Sacramento, CA 95819	IND COM OTH PTY SCC	Sacramento State University Faculty Member	\$50.00	\$600.00			

SUBTOTAL

*Contributor Codes

IND - Individual

COM - Recipient Committee (other than PTY or SCC)

OTH - Other

PTY - Political Party

SCC - Small Contributor Committee

Type or print in ink. Amounts may be rounded

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Monetary Contributions Received			to whole dollars.		Statement covers period from 07/01/2017		CALIFORNIA 460		
SEE INSTRUCTION	Page	of_142							
NAME OF FILER Faculty for Our U	niversity's Future, Local Committee, sponsored by the California Fa	culty Association				I.D. N 12337	lumber 22		
DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO CALENDAR Y (JAN. 1 - DEC	EAR	PER ELECTION TO DATE (IF REQUIRED)		
8/28/2017	Kevin C. Wehr Sacramento, CA 95819	IND COM OTH PTY SCC	Sacramento State University Faculty Member	\$50.00	\$600.00				
9/14/2017	Kevin C. Wehr Sacramento, CA 95819	IND COM OTH PTY SCC	Sacramento State University Faculty Member	\$50.00	\$600.00				
10/9/2017	Kevin C. Wehr Sacramento, CA 95819	IND COM OTH PTY SCC	Sacramento State University Faculty Member	\$50.00	\$600.00				
12/4/2017	Kevin C. Wehr Sacramento, CA 95819	IND COM OTH PTY SCC	Sacramento State University Faculty Member	\$50.00	\$600.00				
12/18/2017	Kevin C. Wehr Sacramento, CA 95819	■ IND □ COM	Sacramento State University Faculty Member	\$50.00	\$600.00				

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*Contributor Codes

IND - Individual

COM - Recipient Committee (other than PTY or SCC)

OTH - Other

PTY - Political Party

SCC - Small Contributor Committee

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Amounts may be rounded to whole dollars.

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Statement covers period

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SEE INSTRUCTIO	ONS ON REVERSE			through12/31/201	7	Page	of142
NAME OF FILER Faculty for Our U	niversity's Future, Local Committee, sponsored by the California Fac	ulty Association				I.D. N 12337	lumber 22
DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO CALENDAR Y (JAN. 1 - DEC	EAR	PER ELECTION TO DATE (IF REQUIRED)
7/31/2017	Elizabeth Ann Whetmore Carson, CA 90747	IND COM OTH PTY SCC	California State University, Dominguez Hills Faculty Member	\$15.00	\$180.00		
8/28/2017	Elizabeth Ann Whetmore Carson, CA 90747	IND COM OTH PTY SCC	California State University, Dominguez Hills Faculty Member	\$15.00	\$180.00		
9/14/2017	Elizabeth Ann Whetmore Carson, CA 90747	IND COM OTH PTY SCC	California State University, Dominguez Hills Faculty Member	\$15.00	\$180.00		
10/9/2017	Elizabeth Ann Whetmore Carson, CA 90747	IND COM OTH PTY	California State University, Dominguez Hills Faculty Member	\$15.00	\$180.00		

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\$15.00

\$180.00

California State University, Dominguez Hills Faculty Member

*Contributor Codes

IND - Individual

12/4/2017

COM - Recipient Committee (other than PTY or SCC)

OTH - Other

PTY - Political Party

SCC - Small Contributor Committee

Elizabeth Ann Whetmore

Carson, CA 90747

Type or print in ink.
Amounts may be rounded

SCHEDULE A (CONT.)

Statement covers period

Monetary Contributions Received		to	to whole dollars.		7	FORM 46U		
SEE INSTRUCTIO	ONS ON REVERSE			through12/31/201	7	Page	of 142	
NAME OF FILER Faculty for Our U	niversity's Future, Local Committee, sponsored by the California Fac	culty Association				I.D. N 12337	umber 22	
DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO CALENDAR Y (JAN. 1 - DEC.	EAR	PER ELECTION TO DATE (IF REQUIRED)	
12/18/2017	Elizabeth Ann Whetmore Carson, CA 90747	IND COM OTH PTY SCC	California State University, Dominguez Hills Faculty Member	\$15.00	\$180.00			
7/31/2017	Delphia D. Williams Northridge, CA 91330	IND COM OTH PTY SCC	California State University, Northridge Faculty Member	\$15.00	\$180.00			
8/28/2017	Delphia D. Williams Northridge, CA 91330	IND COM OTH PTY SCC	California State University, Northridge Faculty Member	\$15.00	\$180.00			
9/14/2017	Delphia D. Williams Northridge, CA 91330	IND COM OTH PTY	California State University, Northridge Faculty Member	\$15.00	\$180.00			

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SUBTOTAL	
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\$15.00

\$180.00

California State University, Northridge Faculty Member

*Contributor Codes

IND - Individual

10/9/2017

COM - Recipient Committee (other than PTY or SCC)

OTH - Other

PTY - Political Party

SCC - Small Contributor Committee

Delphia D. Williams Northridge, CA 91330

Type or print in ink.
Amounts may be rounded
to whole dollars

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Statement covers period

SEE INSTRUCTIONS ON REVERSE		to whole dollars.		from07/01/2017 through12/31/2017		FORM 460 Page 125 of 142	
NAME OF FILER		aculty Association		1		I.D. N 12337	umber 22
DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO CALENDAR YE (JAN. 1 - DEC.	AR	PER ELECTION TO DATE (IF REQUIRED)
12/4/2017	Delphia D. Williams Northridge, CA 91330	IND COM OTH PTY SCC	California State University, Northridge Faculty Member	\$15.00	\$180.00 \$180.00 \$180.00		
12/18/2017	Delphia D. Williams Northridge, CA 91330	IND COM OTH PTY SCC	California State University, Northridge Faculty Member	\$15.00			
7/31/2017	Dorothy D. Wills Pomona, CA 91768	IND COM OTH PTY SCC	Cal Poly, Pomona Faculty Member	\$15.00			
8/28/2017	Dorothy D. Wills Pomona, CA 91768	IND COM OTH PTY SCC	Cal Poly, Pomona Faculty Member	\$15.00	\$180.00		
9/14/2017	Dorothy D. Wills Pomona, CA 91768	IND COM OTH PTY	Cal Poly, Pomona Faculty Member	\$15.00	\$180.00		

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*Contributor Codes

IND - Individual

COM - Recipient Committee (other than PTY or SCC)

OTH - Other

PTY - Political Party

SCC - Small Contributor Committee

SUBTOTAL

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Amounts may be rounded

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Statement covers period

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SEE INSTRUCTIO	ONS ON REVERSE			through	7	Page	of142
NAME OF FILER Faculty for Our U	niversity's Future, Local Committee, sponsored by the California Fac	culty Association				I.D. N 12337	umber 22
DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO CALENDAR Y (JAN. 1 - DEC.	EAR	PER ELECTION TO DATE (IF REQUIRED)
10/9/2017	Dorothy D. Wills Pomona, CA 91768	IND COM OTH PTY SCC	Cal Poly, Pomona Faculty Member	\$15.00	\$180.00		
12/4/2017	Dorothy D. Wills Pomona, CA 91768	IND COM OTH PTY SCC	Cal Poly, Pomona Faculty Member	\$15.00	\$180.00		
12/18/2017	Dorothy D. Wills Pomona, CA 91768	IND COM OTH PTY SCC	Cal Poly, Pomona Faculty Member	\$15.00	\$180.00		
7/31/2017	Robert S. Wilson Rohnert Park, CA 94928	IND COM OTH PTY SCC	Sonoma State University Faculty Member	\$50.00	\$600.00		

Sonoma State University Faculty Member

IND

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\$50.00

\$600.00

*Contributor Codes

IND - Individual

8/28/2017

COM - Recipient Committee (other than PTY or SCC)

Robert S. Wilson

Rohnert Park, CA 94928

OTH - Other

PTY - Political Party

SCC - Small Contributor Committee

Type or print in ink.
Amounts may be rounded

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Monetary Contributions Received			whole dollars.	Statement covers period from 07/01/2017			CALIFORNIA 46		
SEE INSTRUCTION	IS ON REVERSE			through_	12/31/2017		Page	127 o	f_142
NAME OF FILER Faculty for Our Uni	versity's Future, Local Committee, sponsored by the California Facult	y Association					I.D. No 123372		
	THE NAME MAILING ADDRESS		IF AN INDIVIDUAL ENTER	AMOU	NT	CUMULATIVE TO	DATE	PER FI	ECTION

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
9/14/2017	Robert S. Wilson Rohnert Park, CA 94928	IND COM OTH PTY SCC	Sonoma State University Faculty Member	\$50.00	\$600.00	
10/9/2017	Robert S. Wilson Rohnert Park, CA 94928	IND COM OTH PTY SCC	Sonoma State University Faculty Member	\$50.00	\$600.00	
12/4/2017	Robert S. Wilson Rohnert Park, CA 94928	IND COM OTH PTY SCC	Sonoma State University Faculty Member	\$50.00	\$600.00	
12/18/2017	Robert S. Wilson Rohnert Park, CA 94928	IND COM OTH PTY SCC	Sonoma State University Faculty Member	\$50.00	\$600.00	
7/31/2017	Mon S. Yee Pomona, CA 91768	IND COM OTH PTY SCC	Cal Poly, Pomona Faculty Member	\$25.00	\$225.00	

SUBTOTAL

*Contributor Codes

IND - Individual

COM - Recipient Committee (other than PTY or SCC)

OTH - Other

PTY - Political Party

SCC - Small Contributor Committee

Type or print in ink. Amounts may be rounded to whole dollars.

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Monetary Contributions Received			nts may be rounded whole dollars.	Statement cover from 07/01/201	•	CALIFORNIA 460		
SEE INSTRUCTIO	NS ON REVERSE			through12/31/2017	7	Page _	128 of 142	
NAME OF FILER Faculty for Our U	niversity's Future, Local Committee, sponsored by the California Facu	ulty Association				I.D. Nu 123372		
DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO CALENDAR YI (JAN. 1 - DEC.	EAR	PER ELECTION TO DATE (IF REQUIRED)	
12/4/2017	Mon S. Yee Pomona, CA 91768	■ IND □ COM □ OTH □ PTY □ SCC	Cal Poly, Pomona Faculty Member	\$25.00	\$225.00			
12/18/2017	Mon S. Yee Pomona, CA 91768	■ IND □ COM □ OTH □ PTY □ SCC	Cal Poly, Pomona Faculty Member	\$25.00	\$225.00			
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		☐ IND☐ COM☐ OTH☐ PTY☐ SCC						
		☐ IND☐ COM☐ OTH☐ PTY☐ SCC						
			SUBTOTAL	\$17,345.00				

*Contributor Codes

IND - Individual

COM - Recipient Committee (other than PTY or SCC)

OTH - Other

PTY - Political Party

SCC - Small Contributor Committee

Schedule B – Part 1 Loans Received

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Amounts may be rounded to whole dollars.

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Statement covers period

		·	o whole dollars.		from $\underline{07/01}$	/2017	FORM	700
EEE INSTRUCTIONS ON REVERSE					through $\underline{^{12/}}$	/31/2017	Page 129	of <u>142</u>
IAME OF FILER							I.D. NUMBER	
Faculty for Our University's Future, Local Committee	, sponsored by the California Faculty	Association					1233722	
ULL NAME, STREET ADDRESS AND ZIP CODE OF LENDER (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	(a) OUTSTANDING BALANCE BEGINNING THIS PERIOD	(b) AMOUNT RECEIVED THIS PERIOD	(c) AMOUNT PAID OR FORGIVEN THIS PERIOD*	(d) OUTSTANDIN BALANCE A' CLOSE OF TH PERIOD	T PAID THIS	(f) ORIGINAL AMOUNT OF LOAN	(g) CUMULATIVE CONTRIBUTIONS TO DATE
				PAID				CALENDAR YEAR
				FORGIVEN		%		PER ELECTION**
☐ IND ☐ COM☐ OTH ☐ PTY ☐ SCC					DATE DUE	_	DATE INCURRED	
				PAID				CALENDAR YEAR
				FORGIVEN		% RATE		PER ELECTION**
☐ IND ☐ COM☐ OTH ☐ PTY ☐ SCC					DATE DUE	_	DATE INCURRED	
				PAID				CALENDAR YEAR
				FORGIVEN		% RATE		PER ELECTION**
☐ IND ☐ COM☐ OTH ☐ PTY ☐ SCC					DATE DUE	-	DATE INCURRED	
		SUBTOTALS				•		
Schedule B Summary . Loans received this period Total Column (b) plus unitemized loans	s less than \$100.)						(Enter (e) on Schedule E, Line 3)	
2. Loans paid or forgiven this period Total Column (c) plus loans under \$10 Include loans paid by a third party that	0 paid or forgiven.)	dule A.)					* Amounts forg another party a reported on Sc	iven or paid by Iso must be nedule A.
3. Net change this period. (Subtract Lin Enter the net here and on the Summary					Net	negative number)	** If required.	
*Contributor Codes	other than PTV or SCC)	OTH-Other PTV	Political Party	SCC-Small Cor	atributar Commit	too	FPPC Fo	rm 460 (June/01)

2210259

SCC-Small Contributor Committee FPPC Toll-Free Helpline: 866/ASK-FPPC

Schedule B - Part 2 Loan Guarantors

Type or print in ink. Amounts may be rounded to whole dollars.

	SCHEDULE B - PART 2
Statement covers period	CALIFORNIA 460
from <u>07/01/2017</u>	FORM TOO
through <u>12/31/2017</u>	Page <u>130</u> of <u>142</u>

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Faculty for Our University's Future, Local Committee, sponsored by the California Faculty Association

I.D. Number 1233722

FULL NAME, STREET ADDRESS AND ZIP CODE OF GUARANTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	LOAN	AMOUNT GUARANTEED THIS PERIOD	CUMULATIVE TO DATE	BALANCE OUTSTANDING TO DATE
	☐ IND ☐ COM		LENDER		CALENDAR YEAR	
	OTH PTY SCC		DATE		PER ELECTION (IF REQUIRED)	
	□ IND □ COM		LENDER		CALENDAR YEAR	
	OTH PTY SCC		DATE		PER ELECTION (IF REQUIRED)	
	□ IND □ COM		LENDER		CALENDAR YEAR	
	OTH PTY SCC		DATE		PER ELECTION (IF REQUIRED)	
	☐ IND ☐ COM		LENDER		CALENDAR YEAR	
	OTH PTY SCC		DATE		PER ELECTION (IF REQUIRED)	
	1		SUBTOTAL		Enter on Summary Page, Line 17 only	
			SUBTUTAL	•	Line 17 only	

Schedule C Nonmonetary Contributions Received

Type or print in ink.
Amounts may be rounded to whole dollars.

	SCHEDULE C
Statement covers period	CALIFORNIA 460
from07/01/2017	FORM 400
through 12/31/2017	Page 131 of 142

SEE INSTRUC	CTIONS ON REVERSE				throu	ıgh <u>12/31/2017</u>		Page <u>131</u>	of <u>142</u>
NAME OF FILE		California Faculty A	ssociation					I.D. Numb 1233722	er
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	DESCRIPTION O GOODS OR SERVI		AMOUNT/ FAIR MARKET VALUE	CALENI	ATIVE TO ATE DAR YEAR - DEC 31)	PER ELECTION TO DATE (IF REQUIRED)
7/24/2017	California Faculty Association Sacramento, CA 95814	□ IND □ COM ■ OTH □ PTY □ SCC		Legal & Reporting S	ervices	\$357.20	\$4,825.04		
8/21/2017	California Faculty Association Sacramento, CA 95814	□ IND □ COM ■ OTH □ PTY □ SCC		Legal & Reporting S	ervices	\$766.00	\$4,825.04		
10/5/2017	California Faculty Association Sacramento, CA 95814	□ IND □ COM ■ OTH □ PTY □ SCC		Legal & Reporting S	ervices	\$350.10	\$4,825.04		
10/23/2017	California Faculty Association Sacramento, CA 95814	□ IND □ COM ■ OTH □ PTY □ SCC		Legal & Reporting S	ervices	\$554.04	\$4,825.04		
Attach ac	dditional information on appropriately labele	ed continuation	sheets.	SUBTO	TAL	\$2,418.32			
Schedul	e C Summary								
	received this period - nonmonetary contribution all Schedule C subtotals.)				\$2	2,418.32	IN	Contributor Co	
2. Amount	received this period - unitemized nonmone	etary contribution	ons of less than \$100		\$0	0.00			nan PTY or SCC)
	nmonetary contributions received this perines 1 and 2. Enter here and on the Summa		nn A, Lines 4 and 10.)	TOTA	AL <u>\$2</u>	2,418.32	P	TY - Political	Party ontributor Committee

Schedule C **Nonmonetary Contributions Received**

Type or print in ink. Amounts may be rounded to whole dollars.

	SCHEDULE C
Statement covers period	CALIFORNIA 160
from <u>07/01/2017</u>	FORM TOO
through <u>12/31/2017</u>	Page <u>132</u> of <u>142</u>
	I.D. Number

					from	07/01/2017		FOI	RM I C
SEE INSTRUC	TIONS ON REVERSE				thro	ugh <u>12/31/2017</u>		Page <u>132</u>	of <u>142</u>
NAME OF FILE		California Faculty A	ssociation					I.D. Numb 1233722	er
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	DESCRIPTION (GOODS OR SERV		AMOUNT/ FAIR MARKET VALUE	CALEN	ATIVE TO ATE DAR YEAR - DEC 31)	PER ELECTION TO DATE (IF REQUIRED)
11/20/2017	California Faculty Association Sacramento, CA 95814	☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC		Legal & Reporting S	Services	\$254.48	\$4,825.04		
12/26/2017	California Faculty Association Sacramento, CA 95814	☐ IND ☐ COM ■ OTH ☐ PTY ☐ SCC		Legal & Reporting S	Services	\$136.50	\$4,825.04		
		IND COM OTH PTY SCC							
		IND COM OTH PTY SCC							
Attach ad	ditional information on appropriately labele	d continuation	sheets.	SUBTO	OTAL	\$2,418.32			
Schedule	e C Summary								
1. Amount	received this period - nonmonetary contrib	utions of \$100	or more.				*(Contributor Co	odes
2. Amount 3. Total noi	all Schedule C subtotals.)received this period - unitemized nonmone nmonetary contributions received this perioes 1 and 2. Enter here and on the Summa	tary contribution	ons of less than \$100				C	TH - Other TY - Political	nt Committee an PTY or SCC)

Schedule D Summary of Expenditures Supporting/Opposing Other Candidates, Measures and Committees

Type or print in ink.

Amounts may be rounded to whole dollars.

	SCHEDULE D
Statement covers period	CALIFORNIA 160
from07/01/2017	FORM 400
through <u>12/31/2017</u>	Page $\frac{133}{142}$ of $\frac{142}{142}$
	I.D. NUMBER

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Faculty for Our University's Future, Local Committee, sponsored by the California Faculty Association

1233722

DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN.1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
//14/2017	Simi Valley Democratic Club	Monetary Contribution		\$250.00	\$250.00	
		Nonmonetary Contribution				
	■ Support □ Oppose	Independent Expenditure				
/9/2017	SLO County Democratic Party	Monetary Contribution		\$500.00	\$1,500.00	
		Nonmonetary Contribution				
	■ Support □ Oppose	Independent Expenditure				
/15/2017	Butte County Democratic Central Committee	Monetary Contribution		\$250.00	\$250.00	
		Nonmonetary Contribution				
	■ Support	Independent Expenditure				
			SUBTOTAL			

Schedule D Summary

1. Contributions and independent expenditures made this period of \$100 or more. (Include all Schedule D subtotals.)	\$7,005.00
2. Unitemized contributions and independent expenditures made this period of under \$100	\$0.00
3. Total contributions and independent expenditures made this period. (Add Lines 1 and 2. Do not enter on the Summary Page.)	\$7,005.00

Schedule D	
(Continuation Sheet)	
Summary of Expenditures	
Supporting/Opposing Other	
Candidates, Measures and Committee	s

Type or print in ink.
Amounts may be rounded to whole dollars.

	SCHEDULE D (CON	ч і.
Statement covers period	CALIFORNIA ACC	7
from $\phantom{00000000000000000000000000000000000$	FORM 400	7
through <u>12/31/2017</u>	Page <u>134</u> of <u>142</u>	_
	LD NUMBER	

NAME OF FILER

Faculty for Our University's Future, Local Committee, sponsored by the California Faculty Association

I.D. NUMBER 1233722

DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN.1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
9/15/2017	Monterey County Democratic Central Committee	Monetary Contribution		\$1,000.00	\$1,000.00	
		Non-Monetary Contribution				
	Support Oppose	Independent Expenditure				
9/29/2017	Sacramento Central Labor Council COPE	Monetary Contribution		\$1,500.00	\$1,500.00	
		Nonmonetary Contribution				
	■ Support	Independent Expenditure				
9/29/2017	Los Angeles County Democratic Party	Monetary Contribution		\$1,380.00	\$11,380.00	
		Nonmonetary Contribution				
	■ Support □ Oppose	Independent Expenditure				
9/29/2017	Ventura County Democratic Central Committee	Monetary Contribution		\$1,175.00	\$1,975.00	
		Nonmonetary Contribution				
	■ Support □ Oppose	Independent Expenditure				
			SUBTOTAL			

Schedule D	
(Continuation Sheet)	
Summary of Expenditures	
Supporting/Opposing Other	
Candidates, Measures and Committee	s

Type or print in ink.
Amounts may be rounded to whole dollars.

	SCHEDULE D (CONT.
Statement covers period	CALIFORNIA 160
from07/01/2017	FORM 400
through <u>12/31/2017</u>	Page <u>135</u> of <u>142</u>
	I.D. NUMBER

NAME OF FILER

Faculty for Our University's Future, Local Committee, sponsored by the California Faculty Association

1233722

DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN.1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
11/29/2017	Democratic Party of the San Fernando Valley	Monetary Contribution		\$950.00	\$950.00	
		Non-Monetary Contribution				
	Support Oppose	Independent Expenditure				
		Monetary Contribution				
		Nonmonetary Contribution				
	Support Oppose	Independent Expenditure				
		Monetary Contribution				
		Nonmonetary Contribution				
	Support Oppose	Independent Expenditure				
		Monetary Contribution				
		Nonmonetary Contribution				
	Support Oppose	Independent Expenditure				
			SUBTOTAL	\$7,005.00		

Schedule E Payments Made

Type or print in ink.

Amounts may be rounded to whole dollars.

	SCHEDULE E
Statement covers period	CALIFORNIA 160
from07/01/2017	FORM 400
through <u>12/31/2017</u>	Page <u>136</u> of <u>142</u>
	I.D. NUMBER

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Faculty for Our University's Future, Local Committee, sponsored by the California Faculty Association

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

CMP	campaign paraphernalia/misc.	MBR	member communications	RAD	radio airtime and production costs
CNS	campaign consultants	MTG	meetings and appearances	RFD	returned contributions
CTB	contribution (explain nonmonetary)*	OFC	office expenses	SAL	campaign workers' salaries
CVC	civic donations	PET	petition circulating	TEL	t.v. or cable airtime and production costs
FIL	candidate filing/ballot fees	PHO	phone banks	TRC	candidate travel, lodging, and meals
	fundraising events	POL	polling and survey research	TRS	staff/spouse travel, lodging, and meals
IND	independent expenditure supporting/opposing others (explain)*	POS	postage, delivery and messenger services	TSF	transfer between committees of the same candidate/sponsor
LEG	legal defense	PRO	professional services (legal, accounting)	VOT	voter registration
LIT	campaign literature and mailings	PRT	print ads	WEB	information technology costs (internet, email)
	1 - 0		T		and the state of t

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	R DESCRIPTION OF PAYMENT	AMOUNT PAID
Simi Valley Democratic Club Simi Valley, CA 93065	СТВ			\$250.00
Committee ID: 1370241				
SLO County Democratic Party Sacramento, CA 95841	СТВ			\$500.00
Committee ID: 742552				
Butte County Democratic Central Committee Chico, CA 95926	СТВ			\$250.00
Committee ID: 741900				

^{*} Payments that are contributions or independent expenditures must also be summarized on Schedule D.

SUBTOTAL

Schedule E Summary

1. Payments made this period of \$100 or more. (Include all Schedule E subtotals.)	\$7,005.00
2. Unitemized payments made this period of under \$100.	\$50.00
3. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).)	\$0.00
4. Total payments made this period. (Add lines 1, 2, and 3. Enter here and on the Summary Page, Column A. Line 6.)	\$7,055.00

Schedule E (Continuation Sheet) Payments Made

Type or print in ink.

Amounts may be rounded to whole dollars.

	SCHEDULE E (CONT.)
Statement covers period	CALIFORNIA 160
from07/01/2017	FORM 400
through <u>12/31/2017</u>	Page <u>137</u> of <u>142</u>
	LD NUMBER

1233722

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Faculty for Our University's Future, Local Committee, sponsored by the California Faculty Association

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

CMP	campaign paraphernalia/misc.	MBR	member communications	RAD	radio airtime and production costs
CNS	campaign consultants	MTG	meetings and appearances	RFD	returned contributions
CTB	contribution (explain nonmonetary)*	OFC	office expenses	SAL	campaign workers' salaries
CVC	civic donations	PET	petition circulating	TEL	t.v. or cable airtime and production costs
FIL	candidate filing/ballot fees	PHO	phone banks	TRC	candidate travel, lodging, and meals
	fundraising events	POL	polling and survey research	TRS	staff/spouse travel, lodging, and meals
IND	independent expenditure supporting/opposing others (explain)*	POS	postage, delivery and messenger services	TSF	transfer between committees of the same candidate/sponsor
LEG	legal defense	PRO	professional services (legal, accounting)	VOT	voter registration
LIT	campaign literature and mailings	PRT	print ads	WEB	information technology costs (internet, email)

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Monterey County Democratic Central Committee Seaside, CA 93955	СТВ			\$1,000.00
Committee ID: 782515				
Sacramento Central Labor Council COPE Sacramento, CA 95833	СТВ			\$1,500.00
Committee ID: 743338				
Los Angeles County Democratic Party Los Angeles, CA 90010	СТВ			\$1,380.00
Committee ID: 1237135				
Ventura County Democratic Central Committee Camarillo, CA 93012	СТВ			\$1,175.00
Committee ID: 746162				
Democratic Party of the San Fernando Valley Woodland Hills, CA 91364	СТВ			\$950.00
Committee ID: 791828				

^{*} Payments that are contributions or independent expenditures must also be summarized on Schedule D.

SUBTOTAL \$7,005.00

Schedule F Accrued Expenses (Unpaid Bills)

Type or print in ink.
Amounts may be rounded to whole dollars.

Stater	nent covers period	CALIFORNIA 460
from	07/01/2017	FORM 400
through	12/31/2017	Page <u>138</u> of <u>142</u>

INICEDI	ICTIONS	ONIDE	

NAME OF FILER

Faculty for Our University's Future, Local Committee, sponsored by the California Faculty Association

I.D. NUMBER 1233722

CODES: If one of the following codes accurately describes to the campaign paraphernalia/misc. CNS campaign consultants CTB contribution (explain nonmonetary)* CVC civic donations FIL candidate filing/ballot fees FND fundraising events IND independent expenditure supporting/opposing others (explain)* LEG legal defense LIT campaign literature and mailings	the payment, you may enter the code. Otherwis MBR member communications MTG meetings and appearances OFC office expenses PET petition circulating PHO phone banks POL polling and survey research POS postage, delivery and messenger services PRO professional services (legal, accounting) PRT print ads		RAD radio airtime and production co RFD returned contributions SAL campaign workers' salaries TEL t.v. or cable airtime and produc TRC candidate travel, lodging, and n TRS staff/spouse travel, lodging, and r TSF transfer between committees of VOT voter registration WEB information technology costs (in		als neals e same candidate/spons
NAME AND ADDRESS OF CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR DESCRIPTION OF PAYMENT	(a) OUTSTANDING BALANCE BEGINNING OF THIS PERIOD	(b) AMOUNT INCURRED THIS PERIOD	(c) AMOUNT PAID THIS PERIOD (ALSO REPORT ON E)	(d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD
* Payments that are contributions or independent expenditures must also be	CURTOTALC				
* Payments that are contributions or independent expenditures must also be summarized on Schedule D.	SUBTOTALS				
Schedule F Summary 1. Total accrued expenses incurred this period. (Include all So accrued expenses of \$100 or more, plus total unitemized a	chedule F, Column (b) sul ccrued expenses under \$	btotals for	INC	CURRED TOTALS .	
2. Total accrued expenses paid this period. (Include all Sched accrued expenses of \$100 or more, plus total unitemized p	dule F, Column (c) subtota ayments on accrued expe	als for payments on enses under \$100.)		PAID TOTALS	
3. Net change this period. (Subtract Line 2 from Line 1. Ente on the Summary Page, Column A, Line 9.)					May be a negative number.

Schedule G Payments Made by an Agent or Independent Contractor (on Behalf of This Committee)

Type or print in ink.

Amounts may be rounded to whole dollars.

	SCHEDULE G
Statement covers period	CALIFORNIA A CO
from <u>07/01/2017</u>	FORM 40U
through <u>12/31/2017</u>	Page <u>139</u> of <u>142</u>
	I.D. NUMBER 1233722

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Faculty for Our University's Future, Local Committee, sponsored by the California Faculty Association

NAME OF AGENT OR INDEPENDENT CONTRACTOR

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment. MBR member communications CMP campaign paraphernalia/misc. RAD radio airtime and production costs CNS campaign consultants MTG meetings and appearances RFD returned contributions CTB contribution (explain nonmonetary)* OFC office expenses SAL campaign workers' salaries CVC civic donations PET petition circulating TEL t.v. or cable airtime and production costs candidate filing/ballot fees FIL PHO phone banks TRC candidate travel, lodging, and meals TRS staff/spouse travel, lodging, and meals FND fundraising events POL polling and survey research IND independent expenditure supporting/opposing others (explain)* POS postage, delivery and messenger services TSF transfer between committees of the same candidate/sponsor VOT voter registration LEG legal defense PRO professional services (legal, accounting) campaign literature and mailings PRT print ads WEB information technology costs (internet, email)

* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
				<u> </u>

Attach additional information on appropriately labeled continuation sheets.

FPPC Form 460 (June/01) FPPC Toll-Free Helpline: 866/ASK-FPPC

TOTAL*

^{*} Do not transfer to any other schedule or to the Summary Page. This total may not equal the amount paid to the agent or independent contractor as reported on Schedule E.

Schedule H – Loans Made to Others*

Type or print in ink.
Amounts may be rounded

	SCHEDULE H
atement covers period	CALIFORNIA ACO
07/01/0017	CALIFORNIA 460

Loans Made to Others*		to whole dollars.			from07/01/2017		FORM 460	
SEE INSTRUCTIONS ON REVERSE					through <u>12/31/20</u>	017	Page <u>140</u>	of <u>142</u>
NAME OF FILER Faculty for Our University's Future, Local Committee,	sponsored by the California Faculty	Association					I.D. NUMBER 1233722	
FULL NAME, STREET ADDRESS AND ZIP CODE OF RECIPIENT (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	(a) OUTSTANDING BALANCE BEGINNING THIS PERIOD	(b) AMOUNT LOANED THIS PERIOD	(c) REPAYMENT OR FORGIVENESS THIS PERIOD*	(d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD	(e) INTEREST RECEIVED	(f) ORIGINAL AMOUNT OF LOAN	(g) CUMULATIVE LOANS TO DATE
				PAID				CALENDAR YEAR
				FORGIVEN		RATE		PER ELECTION**
					DATE DUE		DATE INCURRED	
				PAID				CALENDAR YEAR
				FORGIVEN		RATE %		PER ELECTION**
					DATE DUE		DATE INCURRED	
Loans that are contributions to another candidate must also be summarized on Schedule D. Loans also be reported on Schedule E.	forgiven must	SUBTOTALS						
			I			(Enter (e) on Schedule I, Line 3))	
Schedule H Summary								
Loans made this period Total Column (b) plus unitemized loans	less than \$100.)							** If Required
Payments received on loans Total Column (c) plus unitemized paym	nents less than \$100.)							
3. Net change this period. (Subtract Line Enter the net here and on the Summar	e 2 from Line 1.)y Page, Column A, Line 7.)				NET (May be a ne	gative number)		

Schedule I Miscellane

Type or print in ink.

		SCHEDULE	
Sta	tement covers period	CALIFORNIA 46	
from _	07/01/2017	FORM 40U	

Aiscellaneous Increases to Cash		Amounts may be rounded to whole dollars.		ement covers period	CALIFORNIA 460		
			from	07/01/2017	FORM 40		
EE INSTRUCTIONS ON REVER	RSE		through	12/31/2017	_ Page 141	_ of 142	
IAME OF FILER Faculty for Our University's Futu	are, Local Committee, sponsored by the California Faculty Associa	ation			I.D. NUMBER 1233722		
DATE RECEIVED	FULL NAME AND ADDRESS OF SOURCE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	DES	SCRIPTION OF	RECEIPT		OUNT OF E TO CASH	
Attach additional inf	formation on appropriately labeled continuation s	sheets.		SUBTO	TAL\$.00		
Schedule I Summa	ry						
	\$100 or more this period			\$0.00			
2. Unitemized increases	to cash under \$100 this period			\$1.23	<u> </u>		
3. Total of all interest red	ceived this period on loans made to others. (Sch	edule H, Column (e).)		\$0.00			
	ncreases to cash this period. (Add Lines 1, 2, and 14.)		то	TAL \$1.23		n 460 (June/01	
					FPPC Forn	n 460 (June/01	

FPPC Toll-Free Helpline: 866/ASK-FPPC

Memo Reference:
Schedule A: California Faculty Association at 1110 K Street, Sacramento, CA 95814 is the intermediary for all contributions. Schedule C: Not subject to contribution limits and reported pursuant to FPPC Regulation 18215(c)(16).
16215(C)(10).